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WALSALL
COUNTY BOROUGH
HEALTH REPORT
1949



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HEALTH REPORT

1949

THOMAS ROSS, M.B., Ch.B., D.P.H.

Medical Officer of Health
and School Medical Officer



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SCHOOL HEALTH SERVICE

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COUNTY BOROUGH OF WALSALL

HEALTH COMMITTEE

From May, 1949 to May, 1950.

CHAIRMAN:

Alderman A. J. Stanley, O.B.E. (died 14.11.49).

Councillor A. W. Percox (from 19.12.49).

VICE-CHAIRMAN:

Councillor E. A. Brockhurst, J.P.

Alderman H. Hucker, J.P.	Councillor D. M. Middleton
Alderman M. J. Kavanagh	Councillor J. H. Pearce
Alderman B. I. Power	Councillor A. W. Percox
Councillor R. Davies	Councillor L. Summers
Councillor H. S. Gwinnutt	Councillor A. M. M. Taylor

EDUCATION COMMITTEE

CHAIRMAN:

Alderman W. R. Wheway, J.P.

VICE-CHAIRMAN:

Councillor T. P. Riley, J.P.

Alderman F. W. Evans, J.P.	Councillor A. M. M. Taylor
Alderman D. Jones, J.P.	Councillor H. F. Truman
Alderman A. McShane	Mrs. W. H. Keay, B.A.
Councillor E. A. Brockhurst, J.P.	Miss H. M. Neville
Councillor A. W. Cotterell, J.P.	Rev. Canon Jenkins
Councillor F. W. Harbidge	Rev. W. Sheeran
Councillor L. Harrington	Rev. W. H. Cox
Councillor F. F. Harrison	Mr. W. A. Burn
Councillor J. S. Minton	Mr. H. Busill Jones, J.P.
Councillor L. Summers	Mr. C. Cartwright

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CHIEF ASSISTANT MEDICAL OFFICER OF HEALTH	A. Brown, M.B., Ch.B., D.P.H.
ASSISTANT MEDICAL OFFICER OF HEALTH (MATERNITY AND CHILD WELFARE)	I. M. Brown, M.B., Ch.B., D.P.H., M.M.S.A., D.R.C.O.G., D.C.H.
ASSISTANT MEDICAL OFFICER OF HEALTH (SCHOOL MEDICAL) . . .	P. J. FitzGerald, L.R.C.P.I., L.R.C.S.I., L.M., D.P.H.
SENIOR SCHOOL DENTIST	N. L. Cookson, L.D.S. (Terminated duties 2.4.49). R. E. Morgan, L.D.S. (From 4.4.49).
ASSISTANT SCHOOL DENTIST . . .	Mrs. I. M. Millar, L.D.S. (Commenced duties 31.1.49).
PUBLIC ANALYST	F. E. Thompson, F.I.C.
CHIEF SANITARY INSPECTOR . . .	C. A. Stansbury.
DEPUTY CHIEF SANITARY INSPECTOR	J. Green.
SAMPLING OFFICER — FOOD AND DRUGS ACT	W. J. Woodward.
SMOKE AND FACTORIES INSPECTOR	E. Bayley.
MEAT INSPECTOR	A. D. Kelley.
HOUSING INSPECTOR	F. G. S. Hill.
SANITARY INSPECTORS	J. F. Marshall. S. Monks. (Commenced duties 3.8.49). F. B. Owen. V. F. Penn. (Commenced duties 1.3.49). K. H. Perry. (Commenced duties 1.2.49). E. M. Thomas. E. V. Beeby. (Terminated duties 15.5.49).
PUPIL SANITARY INSPECTORS . . .	R. C. Drake. W. Wagg.

SUPERINTENDENT HEALTH VISITOR				Miss G. Johnson.
HEALTH VISITORS	Miss S. A. Nolan. ,, E. G. Jones. ,, E. Stokes. ,, M. Scott. ,, E. E. Pedley. ,, J. M. McGuinness. (Terminated duties 22.4.49). ,, A. Jones. (From 1.9.49). ,, M. H. Evans. (From 1.9.49).
HEALTH VISITORS (TEMPORARY)	...			Mrs. D. Devey. (Terminated duties 4.6.49). ,, E. Dunning. ,, D. A. Smith. (Terminated duties 27.4.49). Miss J. M. Jones. (Terminated duties 3.6.49). Mrs. N. Clark. (Commenced duties 8.6.49). ,, H. Myring. (Commenced duties 13.6.49).
PUPIL HEALTH VISITORS		Miss A. Jones. (To 31.8.49). ,, M. H. Evans. (To 31.8.49). ,, E. R. Kettle. (Commenced duties 15.8.49). ,, C. Moran. (Commenced duties 22.8.49).
TUBERCULOSIS HEALTH VISITOR	...			Miss N. Perry.
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SCHOOL DENTAL NURSE		Miss B. L. Bennett.
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CHIEF CLERK	P. Shoesmith.

CLERKS	F. Webb. N. Auliff. C. Riley. A. L. Jobey. G. Lavender. (Terminated duties 7.8.49). G. Brownsword. B. M. Roger. (Re-commenced duties 20.4.49). R. J. Davies. (Re-commenced duties 8.8.49). Miss K. M. Lunn. Miss C. Bytheway. Miss D. I. Hardie. Miss M. B. Harper. Mrs. M. R. Davis. (Terminated duties 31.12.49). Miss B. L. Loffman. Miss S. B. Smith. Mrs. D. Brown (Part-time). (Terminated duties 28.1.49). Miss M. Dexter (Part-time). Mrs. M. Taylor (Part-time). (Commenced duties 31.1.49).
DULY AUTHORISED OFFICER (MENTAL HEALTH SERVICE)	...	...	...	...	J. Wiggin. F. H. Parker (Part-time Deputy).
SENIOR MENTAL WELFARE OFFICER (Duly Authorised Officer)					Miss F. Grant.
ASSISTANT MENTAL WELFARE OFFICER AND GUARDIANSHIP OFFICER	...	...	...	...	Miss H. C. Hawley.
(Duly Authorised Officer)					
SUPERVISOR OCCUPATION CENTRE	...				Miss E. Ratford.
ASSISTANT SUPERVISOR OCCUPATION CENTRE	...	...	...	...	Mrs. H. E. Avery.
MATRON—BESCOT DAY NURSERY	...				Mrs. P. T. Naughton.
MATRON—BLAKENALL DAY NURSERY					Mrs. M. Williams.
AMBULANCE SUPERVISOR	...		...	...	L. J. Parry.

COUNTY BOROUGH OF WALSALL

ANNUAL REPORT

OF THE

Medical Officer of Health

TO THE MAYOR, ALDERMEN AND COUNCILLORS OF THE COUNTY
BOROUGH OF WALSALL

Mr. Mayor, Ladies and Gentlemen,

I have the honour to submit my Annual Report on the state of the public health of the Borough during the year 1949.

Actually the report is a record of the work of the department carried out under the supervision of my predecessor, Dr. James A. M. Clark, who retired from the service of the Corporation in May 1950, after 27 years as Medical Officer of Health.

Dr. Clark's retirement from office came at the end of a phase of intense development in the health services of the town. During his period of office the health services, especially the personal and environmental services, have been developed to cater for a large section of our people, and have proved to be of inestimable value throughout the years. The services provided in Walsall are extremely comprehensive in scope and great credit is due to Dr. Clark for his wisdom and foresight during his years of office and for the advice which he gave to the Council.

Credit is due to him also for the ability with which his schemes were put into practice. It is for his successor to continue this work and to extend the public health services where necessary.

It is with great regret that we record the death of Alderman A. J. Stanley, O.B.E., which took place on the 14th November, 1949, a few days after he had returned from a visit to London where he had been in his capacity as Chairman of the Health Committee.

Alderman Stanley had been Chairman of the Health Committee since 1934, and one might say that he devoted his life to the cause of public health. He was passionately devoted to those measures which were directed to the improvement of the health and social conditions of the less fortunate members of the community and the Borough will be the poorer for his passing.

A few months before his death, his valuable work in Walsall received official recognition when he was awarded the O.B.E., an award which gave real pleasure to all who knew and appreciated his worth.

Health of the Borough

The year on the whole was a healthy one, the death rate being lower than that for the Great Towns, though the infant mortality rate rose sharply, mainly due to an outbreak of gastro enteritis. There was also a sharp increase in the illegitimate infant mortality rate over that of the previous year.

The incidence of Diphtheria again remained extremely low, only 3 cases being notified, whilst there was a substantial reduction in the number of cases of Scarlet Fever, 167 being notified throughout the year as against 411 in the previous year. Only 2 cases of Poliomyelitis were notified with no deaths. There was an outbreak of Measles during the year, 2,478 cases being notified, with 5 deaths, and 451 cases of Whooping Cough were notified with 5 deaths from this disease also.

Respiratory Diseases (other than Tuberculosis) show a decrease, the death rate being 1.30 per 1,000 of the population, compared with 1.33 in the previous year.

Tuberculosis

There was a slight increase in the number of cases of Tuberculosis notified, viz., 155 cases of Pulmonary Tuberculosis as against 152 last year, and 21 cases of other forms of the disease as against 17 cases last year. There has been an increase in the death rate, 96 deaths occurring from Pulmonary Tuberculosis and 9 from other forms of the disease, as compared with 79 deaths from Pulmonary Tuberculosis and 6 from other forms the previous year, the death rates being 0.85 from the Pulmonary form and 0.08 from the Non-Pulmonary form, compared with 0.70 and 0.05 respectively in the previous year.

Cancer

There were 189 deaths from all forms of malignant disease as compared with 196 in the previous year, the death rate being 1.67 as against 1.74 in the previous year.

Venereal Diseases

The number of persons presenting themselves for examination shows a slight decrease, 413 new cases attending as against 429 in the previous year. 168 persons were found to be suffering from Venereal Disease (Syphilis 55, Gonorrhœa 113) and 245 persons were found not to be suffering from the disease. In the previous year the corresponding figures were 169 suffering from Venereal Disease and 260 not suffering from the disease.

Housing

The housing shortage, the most serious problem with which the Council has to deal, still remains. The problems which arise from this shortage of proper accommodation impinges upon practically every aspect of public health, and it is true to say, I think, that were the housing problem solved, the work of the Public Health Department and indeed of the medical profession as a whole would be simplified considerably.

The Chairman and Members of the Health Committee are to be thanked for the constant encouragement which they have undoubtedly given to Dr. Clark during the year under review as are the staff also for the constant and enthusiastic way in which they have carried out the many services administered by the department.

I am, Mr. Mayor, Ladies and Gentlemen,

Your obedient Servant,

THOMAS ROSS,

July, 1950.

Medical Officer of Health.

SUMMARY OF STATISTICS

1. General Statistics

Area in Acres	8,780
Population (At Census 1931)	103,059
Number of Inhabited Houses ,, ,, ,,	23,311
Number of Families ,, ,, ,,	24,953
Population 1948 (estimated)	113,400
Rateable Value	£579,722
Sum represented by a penny Rate	£2,295
Population per Acre	12.9

2. Extracts from Vital Statistics

Number of Live Births Registered	2,211
(Legitimate: M., 1,076 F., 1,030 Total 2,106)	
(Illegitimate: M., 60 F., 45 Total 105)	
Number of Still Births Registered	62
(Legitimate: M., 31 F., 27 Total 58)	
(Illegitimate: M., 2 F., 2 Total 4)	
Birth Rate per 1,000 population (Live Births)	19.50
Number of Deaths (M. 726, F. 601)	1,327
Crude Death Rate per 1,000 population	11.70
Standardised Death Rate	13.22
Number of Women dying in or in consequence of Childbirth:	
From Puerperal Sepsis	1
From other Puerperal Causes	2
Maternal Mortality per 1,000 (live and still) Births	1.32
Number of Deaths of Infants under 1 year of age	123
Infant Mortality per 1,000 Births	55.63
Infant Mortality (legitimate infants) per 1,000 births	55.55
Do. (illegitimate infants) do.	57.14
Death Rate per 1,000 Population, from—	
Respiratory Tuberculosis	0.85
All forms of Tuberculosis	0.93
Respiratory Diseases (excluding Tuberculosis)	1.30
Cancer	1.67
Seven Principal Zymotic Diseases (Smallpox, Enteric Fever, Measles, Scarlet Fever, Whooping Cough, Diphtheria and Membranous Croup)	0.09
Death Rate from Diarrhœa and Enteritis of Children under 2 years of age, per 1,000 births	15.83
Deaths from Diarrhœa under 2 years	35
Deaths from Measles (all ages)	5
Deaths from Whooping Cough (all ages)	5

Coroner's Inquests

171 inquests were held in the Borough during the year (111 males and 60 females).

POST-MORTEM EXAMINATIONS ordered by Coroner	...	138
SUMMARY OF INQUESTS	M.	F.
Death by Murder	...	...
„ Suicide	...	...
„ Manslaughter and Infanticide	...	...
„ Self-induced Abortion	...	...
„ Neglect	...	...
„ Want of Attention at Birth	...	...

Accident or Misadventure	...	...	...	37	20
Death from Natural Causes	...	...	...	65	35
Stillborn	...	...	...	—	—
Open Verdicts	...	...	...	—	—
Inquests adjourned	...	...	...	—	—
				111	60

Inquests on children suffocated whilst in bed (accidental)	...	...	...	—	1
Inquests on bodies of newly born children	...			—	5

Vital Statistics

The Birth Rate shows a decrease, being 19.50 per 1,000 of the population, compared with 20.56 for 1948, the figures for England and Wales being 16.70 and 17.90 respectively, and for the Great Towns 18.70 and 20.00.

The Illegitimate Birth Rate shows an increase, being 0.93 per 1,000 of the population, compared with 0.85 for 1948. There were 105 illegitimate births in 1949 and 96 in 1948. There was an increase in the Death Rate, this being 11.70 per 1,000 of the population, compared with 10.68 for 1948, the figures for England and Wales being 11.70 and 10.80, and for the Great Towns 12.50 and 11.60 respectively. The Infant Mortality Rate shows an increase, being 55.63 per 1,000 births against 42.76 in 1948. The rate for England and Wales was 32.00 and 34.00, and for the Great Towns 37.00 and 34.00 respectively. The illegitimate Infant Mortality Rate has increased to 57.14 per 1,000 illegitimate births from 20.83 in 1948. There were 3 Maternal Deaths, giving a Maternal Death Rate of 1.32 per 1,000 live and still births, against 0.84 in 1948. The respective rates for England and Wales were 0.98 and 1.02.

The Death Rate from Respiratory Tuberculosis has increased to 0.85 per 1,000 of the population, from 0.70 in 1948. From other Respiratory Diseases the Death Rate has slightly decreased, being 1.30 against 1.33 in 1948.

CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE IN WALSALL COUNTY BOROUGH 1949

As furnished by the Registrar-General

CAUSES OF DEATH.		Sex	All Ages	0-	1-	5-	15-	45-	65-
ALL CAUSES ...	...	M. F.	726 601	69 54	9 6	5 7	77 61	193 112	373 361
1. Typhoid and Paratyphoid Fevers	...	M. F.	— —	— —	— —	— —	— —	— —	— —
2. Cerebro-Spinal Fever	...	M. F.	— 2	— 1	— —	— —	1 —	— —	— —
3. Scarlet Fever	...	M. F.	— —	— —	— —	— —	— —	— —	— —
4. Whooping Cough	...	M. F.	— 3	— 3	— —	— —	— —	— —	— —
5. Diphtheria	...	M. F.	— 2	— 1	1 —	— —	— —	— —	— —
6. Tuberculosis of Respiratory System	...	M. F.	— 59	— —	— 1	— —	— 25	— 21	— 12
7. Other Forms of Tuberculosis	...	M. F.	37 6	— 2	— 1	— 1	31 2	6 1	— —
8. Syphilitic Diseases	...	M. F.	3 6	— —	1 —	— —	1 —	3 —	— 3
9. Influenza	...	M. F.	— 6	— —	— —	— —	1 1	— 1	— 4
10. Measles	...	M. F.	14 4	— 1	— 3	— —	— —	— —	12 —
11. Ac. Poliomyelitis, etc.	...	M. F.	— 1	— 1	— —	— —	— —	— —	— —
12. Ac. Inf. Encephalitis	...	M. F.	2 1	2 1	— —	— —	— —	— —	— —
13. Cancer, Buc. Cavity, Oesophagus and Uterus	...	M. F.	8 10	— —	— —	— —	— —	— 4	8 6
14. Cancer, Stomach and Duodenum	...	M. F.	15 12	— —	— —	— —	3 1	7 2	5 9
15. Cancer of Breast	...	M. F.	— 24	— —	— —	— —	— 2	— 10	— 12

CASES OF INFECTIOUS DISEASE NOTIFIED DURING THE YEAR 1949

NOTIFIABLE DISEASE	CASES NOTIFIED IN WHOLE DISTRICT											TOTAL CASES NOTIFIED IN EACH WARD									Total Deaths *	
	At All Ages	At Ages—Years										Bloxwich Ward	Leamore Ward	Harden Ward	Birchills Ward	Hatherton Ward	Paddock Ward	Bridge Ward	Pleck Ward	Caldmore Ward		Palfrey Ward
		Under 1	1 to 2	2 to 3	3 to 4	4 to 5	5 to 10	10 to 15	15 to 25	25 to 35	35 to 45												45 to 65	65 and upwards
Small-Pox ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Cholera (C.) Plague (P.)	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Diphtheria ...	3	1	—	—	—	1	1	—	—	—	—	—	—	1	—	—	—	—	1	1	—	—
Erysipelas ...	24	—	—	—	—	1	—	—	1	4	4	9	5	6	2	—	1	5	—	2	—	—
Scarlet Fever ...	167	—	4	14	13	21	90	13	10	1	—	1	—	47	9	3	15	9	17	12	19	—
Typhus Fever ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Enteric Fever ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Paratyphoid ...	2	—	—	—	—	—	—	1	—	—	1	—	—	—	—	2	—	—	—	—	—	—
Measles ...	2478	111	348	459	346	343	828	28	8	5	1	—	1	638	142	85	176	109	376	226	233	5
Whooping Cough	451	55	68	79	78	53	113	4	—	—	1	—	—	184	22	16	13	29	68	14	48	5
Puerperal Pyrexia	4	—	—	—	—	—	—	—	—	3	1	—	—	3	—	—	—	—	—	—	1	—

[illegible]

*These deaths do not necessarily refer to the cases notified.

INFECTIOUS DISEASES

Diphtheria

3 cases of Diphtheria were notified, compared with 3 in 1948. There were no fatal cases, against one in the previous year. 2 of the cases occurred in non-immunised persons. 2,229 children (1,067 under the age of five years and 1,162 between the ages of five and fifteen), were immunised against the disease. 2,111 children were given a reinforcing dose.

Scarlet Fever

167 cases of Scarlet Fever were notified during the year, as compared with 411 in the previous year. The disease was of a mild character and there were no deaths.

Measles

Measles were more prevalent, 2,478 cases being notified as compared with 537 in the previous year. There were 5 deaths.

Whooping Cough

451 cases of Whooping Cough were notified as compared with 434. There were five fatal cases.

Acute Primary or Influenzal Pneumonia

195 cases were notified as compared with 236. There were 51 deaths from this cause during the year, a decrease of 5 on the previous year. Influenza accounted for 20 deaths as compared with 4 in the previous year.

Other Diseases

Two cases of Poliomyelitis and two cases of Cerebro-Spinal Fever were notified. There were two deaths from Cerebro-Spinal Fever.

Goscote Isolation Hospital

Goscote Isolation Hospital, which was opened by the County Borough of Walsall on 1st April, 1930 as an infectious diseases hospital, was closed as such by the Hospital Management Committee on 5th February, 1950. The number of cases of infectious disease during the previous two or three years had been so small that its continuance as a special hospital of this type could no longer be justified. Goscote also suffered like so many others from a severe shortage of nursing staff.

During the 20 years of its life as an infectious diseases hospital, Goscote had gained a very high reputation for the care and attention which the patients—mostly children—received. Miss Bird, the Matron, took a very great personal interest in all her patients and she did her utmost to see that they received not only the best nursing attention possible, but also that they were happy and contented. In this she succeeded and I am very grateful to her and her staff for the magnificent way in which this was achieved.

After the closing of Goscote for infectious diseases, arrangements were made for cases of infectious disease from Walsall to be admitted to the Moxley Isolation Hospital.

NURSING HOMES

At the end of the year there were two nursing homes in the Borough to which maternity cases are admitted, and one nursing home for old people. The two maternity nursing homes are registered to take a total of 9 maternity cases; the home for aged persons is registered to take 3 cases. No new homes were registered during the year, but two nursing homes taking maternity cases were closed because of the lack of patients.

As forecast in last year's report the two homes which closed found it increasingly difficult to attract patients now that the free services under the National Health Service Act are available to all. The two homes concerned had carried out useful work for a number of years and were a valuable adjunct to the maternity services of the Borough.

The Senior Medical Officer for Maternity and Child Welfare paid a total of 14 visits to all the homes during the year and found them to be in a satisfactory condition.

There were no outbreaks of infectious disease during the year.

SCABIES TREATMENT

The Health Committee have established a Scabies Clinic in premises in Hatherton Road and two attendants are employed to give the necessary treatment to school children and adults.

Since the war ended the number of cases attending for treatment has shown a steady decline, partly due to the effective treatment available and also to the ending of re-infection which was widespread during the war years.

During the year 30 men, 36 women and 118 children received treatment, a total number of 303 attendances being made for this purpose.

The decline in the number of cases now coming forward is proof of the justification for setting up a clinic of this nature and we are of opinion that it should be maintained to keep this disease under control. It is to be hoped that the persuasion of Health Visitors in matters of cleanliness will in due course have its effect.

CLEANSING OF PERSONS

Arrangements are in force whereby unclean persons are cleansed at Beacon Lodge. During the year 17 persons received the necessary treatment by arrangement with the Health Department.

NURSERIES AND CHILD-MINDERS

The Nurseries and Child-minders Regulations Act, 1948 came into force on the 30th July and provides for the registration of nurseries and child-minders where children numbering more than 2 and who come from more than one household are cared for. The Act does not apply to the care of children by relatives.

The care of such children in Walsall has never been a serious problem and up to the end of the year no premises or persons had been registered under the Act.

PATHOLOGICAL EXAMINATIONS

The arrangements outlined in last year's report for the examination of pathological and bacteriological specimens by the National Laboratories Service have continued throughout the year. The laboratory, situated at Stafford, is directed by the Medical Research Council for the Ministry of Health, and the service is a complete one covering all our possible requirements. The laboratory has instituted a motor collection service and our thanks are due to the Director for the trouble he has taken to give us such an efficient service.

The medical staff of the Health Department send specimens for examination regularly and the service is also open to any of the local medical practitioners.

The bacteriological examination of milk and other specimens is also carried out.

PUBLICITY

The campaign of Health Education has been steadily maintained throughout the year. Appropriate posters, supplied by the Central Council for Health Education are displayed at the Welfare Centres, Clinics and waiting rooms, and co-operation has also been developed with the Royal Society for the Prevention of Accidents. Many useful posters are issued by the latter body, drawing the attention of parents to dangers in the home from common household articles, fire, etc., and we feel this to be a necessary part of the education of the young mother. The Diphtheria Immunisation publicity campaign has of course been pursued continuously.

In last year's report a system of personal approach to parents relating to vaccination and infant diphtheria immunisation was outlined. Briefly this approach consists of a reminder which is sent to parents when their child attains the age of 3 months of the facilities which are available for vaccination against smallpox and inviting parents to make an appointment to have their child vaccinated. Upon the child attaining the age of one year a Birthday Card is sent to each child which also reminds the parent of the need for Diphtheria Immunisation and an invitation to make an appointment for this to be carried out. On the whole we feel these steady and persistent reminders of the dangers of diphtheria, and the way in which the disease can be prevented, ultimately has its effect, and, whilst we would wish for a much higher percentage of acceptances both for Diphtheria Immunisation and Vaccination, nevertheless the progress made in educating the public must be accounted reasonably satisfactory.

Considerable attention has been paid to lectures by the staff, more particularly talks to parents at Parent-Teacher Associations, and Mothercraft and Hygiene instruction to the older girls in the schools. This latter activity is particularly useful for we find that during the course of these talks to the older girls much information on the Public Health Service can be conveyed to them which would not be absorbed through any other means.

Other officers of the department have lectured to various organisations throughout the year, and we hope to extend this side of our work as opportunity occurs.

One form of publicity which is not readily apparent is the stream of enquiries at the Health Department. Here is an opportunity for personal contact with the public which is not to be overlooked, and the staff are always willing to explain very fully any service about which information is requested. Sometimes an opportunity occurs to supplement the required information with leaflets, etc., and we are convinced that, given the proper approach by the staff to the public, goodwill can be built up between them and the Department.

Publicity alone, of course, is not enough; it must be backed by a personal service which really means something to the recipient, and such is our aim in each of the services we operate.

VENEREAL DISEASES

On the 5th July, 1948 the Venereal Diseases Clinic at Manor Hospital was transferred to the Regional Hospital Board and as from that date the Council is no longer responsible for the work carried out at the Clinic.

We are, however, still concerned with the incidence of Venereal Diseases in the town and shall continue to work in close co-operation with the Venereal Diseases Medical Officer.

The following table shows the work of the Venereal Diseases Clinic during the year:—

TABLE SHOWING THE WORK OF THE VENEREAL DISEASES CLINIC DURING THE YEAR 1949

	Syphilis		Gonorrhœa		Conditions other than Venereal		Totals		Totals
	M.	F.	M.	F.	M.	F.	M.	F.	
Number of cases on Register 1st January, 1949 ...	90	93	60	26	34	9	184	128	312
Number of old cases returned for treatment or observation of same infection ...	2	2	1	—	—	—	3	2	5
Number of new cases dealt with for the first time ...	33	22	95	18	121	124	249	164	413
Number of new cases transferred from other centres ...	5	—	4	—	—	—	9	—	9
Total cases dealt with ...	130	117	160	44	155	133	445	294	739
Attendances—Medical examinations ...	1270	980	1005	228	692	468	2967	1676	4643
Irrigation, dressings ...	13	—	62	—	182	18	257	18	275
Total attendances ...	1283	980	1067	228	874	486	3224	1694	4918
Walsall persons treated at Centres in other towns ...	—	—	2	—	8	—	10	—	10
Number of new cases attending during 1949	31	—	36	—	99	—	166	—	166
Walsall ...	24	—	77	—	146	—	247	—	247
Staffordshire ...	—	—	—	—	—	—	—	—	—
Pathological Work—	Microscopical		Cultural for Gonorrhœa		Serum		Cerebro-Spinal Fluid		Others for Diagnosis of Venereal Disease
Specimens examined at Walsall Clinic ...	for Syphilis	for Gonorrhœa	for Syphilis	for Gonorrhœa	for Syphilis	for Gonorrhœa	for Syphilis	for Gonorrhœa	
do an Approved Laboratory	104	1378	—	—	—	—	—	—	57
	—	—	1204	—	—	7	30	—	—

Pathological Work—
Specimens examined at Walsall Clinic ...
do an Approved Laboratory

NATIONAL HEALTH SERVICE ACT

1946

HEALTH CENTRES

The question of the reservation of sites in the Borough for the establishment of Health Centres has been discussed with the Local Medical Committee, and in consequence of these discussions seven sites were reported to the Health Committee for reservation at Bloxwich, Blakenall, Leamore, Hatherton Road, Pleck, Paddock and Caldmore. For various reasons there must be considerable delay before any progress is made with the provision of such centres.

CARE OF MOTHERS AND YOUNG CHILDREN

Dr. I. M. Brown, the Senior Medical Officer of Health for Maternity and Child Welfare, has supplied the following report upon the Maternity and Child Welfare work in the department:—

“In my report last year I stated that, as expected, there had been a falling off in attendances at clinics generally following the introduction of the National Health Service Act of 1946. Towards the end of 1948 there was some improvement in attendances at the Ante-Natal Clinics and the position during 1949 remained much the same. Nevertheless the actual number of new cases attending the Ante-Natal Clinics was considerably below the number prior to the introduction of the National Health Service Act. In particular the attendances at the Countess Street Clinic are very poor indeed, although the attendances at the Infant Welfare sessions of this centre are amongst the largest in the town.

During the year 621 blood tests were taken at the Ante-Natal Clinics for the Wasserman reaction. Six of these were found to be positive and the patients were referred to the Venereal Diseases Clinic for treatment with satisfactory results. Routine Blood Group and Rhesus Type Tests were commenced in February and of 501 tests taken 90 were proved to be Rhesus negative; of this number only 3 required treatment. In one of the cases the infant died in spite of replacement transfusion, one was successfully treated and is perfectly healthy, whilst the third case was one of Hydrops Fœtalis with still-birth. A routine Hæmoglobin test is taken at the same time and is a guide to the degree of anæmia present. Patients are issued with Blood Group Cards which are of great value should transfusion become necessary.

There is still scope for improvement in the co-operation between general practitioners and the ante-natal clinics; for instance, expectant mothers under the general supervision of their own doctors could attend the ante-natal clinics for routine supervision and tests, and this procedure would relieve to some extent the pressure on the general practitioner and would in no way detract from his responsibility for the case. Such co-operation between the general practitioner and the ante-natal clinic could quite easily be arranged without any overlap of responsibility and with consequent benefit to the patient.

The demand for hospital beds for women in confinement continues to be very heavy and many deserving cases have to be refused owing to lack of accommodation. This shortage of hospital beds throws a heavy strain on the Domiciliary Midwifery Service, even though the number of Midwives engaged was increased to 15 during the year. Two of the Midwives were off duty through illness for long periods and a third resigned on emigration to Australia, and this threw an additional burden on the staff. In addition, cases discharged from hospital shortly after delivery were passed to the Midwives for home nursing.

When a case of Puerperal Pyrexia occurs it would be a great help to transfer the case to the Home Nursing Service, but shortage of staff in that Service makes this course impossible at the present time.

The attendances at the Child Welfare Centres have been reasonably good, particularly of those children under one year of age. The toddler is not brought to the Centre for regular supervision with the same enthusiasm as is the infant, although every endeavour is made to persuade mothers of the advantages to be gained from this course. I am pleased to report that, with the mothers attending the Centres, Diphtheria Immunisation is an accepted fact and has become more or less a matter of routine, but the response to vaccination is still very poor indeed. We shall continue our efforts to improve this position.

A useful innovation this year has been the interchange between the medical staff of Manor Hospital and the Public Health Staff, Dr. Lindop from Manor Hospital attending at one of the Child Welfare Sessions once weekly, whilst I have attended the Pædiatric Clinic at Manor Hospital which is conducted by Mr. Everley Jones. This co-operation between the Hospital and the Child Welfare Centres is both stimulating and valuable to both sides."

INFANT WELFARE CENTRES

The following tables show the attendances at the five infant welfare centres and four ante-natal and post-natal clinics in the Borough.

The provision of additional welfare centres in the newly populated areas is under consideration, and the centres at Field Road and Littleton Street are now becoming unsuitable for the work which has to be carried out there.

Consideration should also be given in the future to the establishment of a Child Guidance Clinic in the Borough.

Attendances Registered at the Infant Welfare Centres during 1949

CENTRE	Under 6 months		6—12 months		1—2 years		2—5 years		Total		New Cases
	A.	M.	A.	M.	A.	M.	A.	M.	A.	M.	
Pool St. ..	2057	522	1268	297	887	239	1143	188	5355	1246	239
Field Rd. ..	3498	1178	1645	521	1167	394	1694	351	6586	1831	606
Littleton St.	1810	512	995	284	629	197	1043	171	4477	1164	306
Countess St.	2600	738	1494	405	1160	328	1273	287	6527	1758	309
Ida Rd. ..	1713	467	1184	324	764	202	984	197	4645	1190	237
Totals ..	11678	3417	8004	2444	4607	1360	6137	1194	29008	7802	1697

A.—Attendances.

M.—Medical Examinations.

Attendances Registered at the Ante-natal and Post-natal Clinics during 1949

	Pool St.		Field Rd.		Countess Street		Ida Rd.		Totals	
	A.	M.	A.	M.	A.	M.	A.	M.	A.	M.
Ante-natal Cases ...	718	481	2131	1601	558	445	765	576	4172	3103
Ante-natal New Cases	135		334		87		147		703	
Post-natal Cases ...	11	11	7	7	5	5	6	6	29	29
Post-natal New Cases	11		7		5		6		29	

A.—Attendances.

M.—Medical Examinations.

DENTAL TREATMENT

Owing to the lack of staff it has not been possible to implement the proposals made under Section 22 of the National Health Service Act for the extension of the dental service to expectant and nursing mothers, and children under the age of five years who are not in attendance at school.

These proposals provided for adequate facilities for every expectant mother to be examined by a dental practitioner following her first attendance at an Ante-natal Clinic; for the periodical examination of children under the age of 5 years and for the necessary treatment to be provided where required, particular attention to be paid to conservative treatment.

Day Nurseries

The two Day Nurseries, one situated at the Bescot Methodist Schools and the other at the Blakenall Congregational Schools, have both been filled to capacity throughout the year. There is a long waiting list at each Nursery and the Health Committee have reserved sites for the building of permanent Day Nurseries and it is hoped that the erection of these Nurseries will not be long delayed.

There is a large number of women with young children who are working at the present time and the continuing demand for accommodation for their children makes it very difficult to select the most deserving cases for admission. It is a fact that some children reach school age before their turn for admission to the nursery arrives.

The training scheme for Day Nursery Student Nurses has had to be terminated on the grounds that the premises in which the nurseries are housed are not satisfactory for their training. It is admitted that the premises are not ideal, but they have served and continue to serve a very useful purpose. Both nurseries had been recognised as training nurseries from their inception and we feel that withdrawal of recognition at a time when the building of new premises was quite impossible, was somewhat autocratic.

The Health Committee have long recognised the inadequacy of the present buildings and it has been their intention to provide ad hoc premises when the time was opportune.

Proposals for the building of a new day nursery in the Harden area have in fact been submitted to the Ministry of Health, but at the time of writing no comment on the proposals has as yet been made.

The existing nurseries are working under difficult conditions in unsuitable premises, but on the whole, extremely good work has been done there and the general health and physical condition of the children is good. We have now appointed Wardens for both nurseries and they have been able to recommence organised games and teaching which is such a necessary part of day nursery life.

The following table shows the average attendances at the Nurseries during the year:—

Day Nursery	Average No. on Register	Total No. of attendances	Average daily attendances
Bescot ...	65	11,765	47.7
Blakenall ...	57	11,577	46.8

Maternity Outfits

As stated in the Report for 1948, the Council has continued the provision of Maternity Outfits to each expectant mother confined at home, and during the year 1949 1,350 Maternity Outfits have been issued. Each Outfit contains the following:—

- 1 18 x 18 Accouchement Sheet
- 12 Large Maternity Pads
- 12 Extra Large Maternity Pads
- 1 Sheet Tarred Paper 36 x 45
- 3 4-oz. packets Wool
- 6 5 x 5 Umbilical Pads.

The distribution of the Outfits is made through the Municipal Midwives, a sufficient stock being maintained by them to meet all possible needs. There is no doubt the provision of these Outfits has been of great benefit to mothers whose confinements are to take place at home and we know they are very much appreciated. The Midwives, also, are assured of adequate equipment for the confinement, together with sterile dressings, and their work has been facilitated accordingly.

Provision of Foods

The sale of Infant Foods of various kinds has been continued at the Welfare Centres throughout the year and we are glad to report that we have been able to meet every demand which has been made upon this service. In addition to the proprietary foods which are sold at the Centres, National Dried Milk is also available. National Dried Milk is also obtainable direct from the Food Office, and we again put on record that in our opinion it would be much more satisfactory if the sale of National Dried Milk was centred entirely at the Welfare Centres. Mothers who attend at the Food Office for their supplies often do not make the additional journey to the Welfare Centre and the supervision of these children is thereby not so easily maintained. We would stress also that the ease with which National Dried Milk can be obtained is an encouragement for the mother to bottle feed her baby, and by the time the child does attend at the Welfare Centre, it is too late for breast feeding to be established.

The following table shows the types and amounts of foods sold during the year at the Welfare Centres and it will be noted that provision has been fully made for every type of food to be sold to meet individual children's needs:—

12,444 lbs.	Cow and Gate Dried Milk
2,534 lbs.	Ostermilk
4,412 lbs.	Trufood
20 lbs.	Frailac
165 lbs	Daltose
1,913 tins	Lactagol
3,222 tubs	Virol
2,865 tins	Ovaltine
211 lbs.	Cod Liver Oil and Malt
1,408 pkts.	Farex

In addition, should any child need a special food, even for only a limited period, steps are immediately taken to obtain a supply for the mother, though the purchase of such foods may occasionally involve the department in a slight financial loss.

During the year arrangements have been made for National Dried Milk, Orange Juice and Cod Liver Oil to be distributed at all ordinary welfare and ante-natal sessions, so that there is now no need for the mother to make an additional journey to the centres to obtain her supplies.

UNMARRIED MOTHERS AND CHILDREN

Care of Illegitimate Children. The Walsall County Borough, as the Welfare Authority, is a constituent authority of the Staffordshire County Council Scheme for the care of illegitimate children and their mothers.

The following report has been supplied by the Secretary of the Lichfield Diocesan Association for Moral Welfare Work:—

“Thirty-eight cases in which illegitimate births occurred in 1949 have been dealt with by Sister Ellis, the Outdoor Worker for the area.

8 mothers remained in their own homes for their confinements.

23 mothers went to hospital.

7 expectant mothers went into Diocesan Homes about two months before their babies were due to be born and remained until satisfactory arrangements were made for them and their babies

6 mothers and babies were admitted to Glentworth Hostel, Stafford, on their discharge from hospital and in all cases benefited by the atmosphere of the Homes and by the training they received.

The babies born in 1949 were accommodated as follows:—

27 with their mothers at home.

8 adopted.

1 with its mother in a domestic situation.

1 placed in the care of the Local Authority.

1 died in hospital when 3 days old.

In addition to the cases occurring in 1949, the Outdoor Worker has visited many mothers and babies whose cases were dealt with in previous years and several of these mothers have kept in friendly touch both with the worker and with the Superintendents of the homes.

On 31st December, 14 expectant mothers whose babies were due in 1950 were under care.”

PREMATURE INFANTS

Notifications were received in respect of 146 infants whose birth weight was $5\frac{1}{2}$ lbs. or under, a decrease over the previous year when 153 such infants were notified to us. In some cases the notifications applied to infants who, although the birth weight was $5\frac{1}{2}$ lbs. or less, were really full-term, but these infants were given the same care as those prematurely born.

Of the 146 infants notified, 71 were born at home, 65 in hospital, and 10 in private nursing homes. There were 16 sets of twins. 9 of the infants born at home were transferred to hospital. Six of the infants nursed entirely at home died as follows: 4 in the first 24 hours and 2 between the second and eighth day. Seven of the 9 infants who were born at home, and transferred to hospital, died as follows: 3 in the first 24 hours, 1 between the second and eighth day and 3 between the eighth and twenty-eighth day.

Eleven of the infants born in hospital died as follows: 6 in the first 24 hours, 3 between the second and eighth day and 2 between the eighth and twenty-eighth day. The remainder, 58 born at home, 54 born in hospital and 10 born in private nursing homes, survived at the end of 28 days.

Of the 123 infants who died under the age of one year, 21 were certified as having died from prematurity; 12 of these babies were of low birth weight.

Emergency Maternity Service

Arrangements are in force for the services of an emergency team of doctors and nurses from Manor Hospital, with the necessary equipment, to attend complicated cases of labour on the district when required.

Maternal Mortality

There were three maternal deaths during the year, one of which was from puerperal sepsis. The death rate is 1.32 per thousand of live and still births, as against a death rate in England and Wales of 0.98.

Infectious Diseases

There were four cases of Ophthalmia Neonatorum notified during the year. In all these cases, after treatment, the vision was unimpaired and all the infants made a good recovery.

There were four cases of Puerperal Pyrexia notified during the year.

INFANT MORTALITY

123 children died under the age of one year, giving an infant death rate per thousand births of 55.63. This death rate is a considerable increase over that recorded for last year when the rate was 42.76. The increase is wholly accounted for by an outbreak of gastro-enteritis which was prevalent particularly during the third and fourth quarters of the year. In thirty-five cases of infants who died gastro-enteritis was certified either as the cause of death or as a contributory factor. Eight of the infants died in their own homes and the remainder in hospital.

This setback in the steady progress which has been made in the number of infant deaths occurring in the borough is a further incentive for us to redouble our efforts in saving infant life. The experience lends support to a view which is gaining wider currency that whenever practicable the admission of young children to hospital is to be avoided.

INFANT MORTALITY DURING THE YEAR 1949

Nett Deaths from stated Causes at various ages under One year of age

CAUSES OF DEATH	Total Deaths under 1 year	Under 1 week	1-2 weeks	2-3 weeks	3-4 weeks	Total under 4 weeks	1 & under 3 months	3 & under 6 months	6 & under 9 months	9 & under 12 months	Bloxwich	Leamore	Harden	Birchills	Hatherton	Paddock	Bridge	Pleck	Caldmore	Palfrey
Measles	2	—	—	—	—	—	—	—	2	—	1	—	1	—	—	—	—	—	—	—
Whooping Cough ...	4	—	—	—	—	—	1	2	—	1	1	—	1	1	—	—	—	—	—	1
Other Common Infectious Diseases	1	—	—	—	—	—	—	—	1	—	—	—	—	1	—	—	—	—	—	—
Diarrhoea and Enteritis ...	32	1	—	5	4	10	6	9	4	3	4	3	12	3	4	—	1	1	—	4
Premature Birth ...	21	15	2	2	2	21	—	—	—	—	1	3	5	3	—	1	1	2	2	3
Congenital Malformations																				
Birth Injury; Infant Diseases	40	27	2	3	1	33	4	1	—	2	3	2	11	8	2	1	4	5	2	2
Tubercular Diseases ...	2	—	—	—	—	—	—	1	—	1	—	—	—	—	—	—	—	—	—	2
Bronchitis & Pneumonia	8	—	—	—	1	1	4	2	1	—	—	1	3	—	—	1	2	—	1	—
Other Causes	13	3	—	—	—	3	4	3	3	—	1	1	5	1	—	2	—	1	1	1
TOTALS	123	46	4	10	8	68	19	18	11	7	11	10	38	17	6	5	8	9	6	13

Nett Births in the Year—Legitimate, 2,106; Illegitimate, 105.

Nett Deaths in the Year of Legitimate Infants, 117; Illegitimate Infants, 6.

MIDWIFERY SERVICE

The number of births registered during the year was 2,211, a decrease of 101 over the previous year. 1,242 of these cases were attended by the Municipal Midwifery Staff, who were also responsible for 6,033 ante-natal home visits to their patients.

All the midwives, with one exception, are qualified to administer analgesia, having received their training either at the Birmingham Maternity Hospital, where special courses were arranged, or as a part of their S.C.M. qualification. The Department has provided six gas and air outfits and these are available for use in any part of the town. The outfits are conveyed to the patient's home at the request of the midwives by the ambulance and car service thus ensuring the minimum delay when the outfit is required. The service is much appreciated by the patients and those availing themselves of the anæsthetic speak highly of the relief obtained. During the year 340 expectant mothers who were confined at home availed themselves of the gas and air facilities.

During the year consideration was given, in conjunction with the Walsall Hospital Management Committee, to the training of pupil midwives on the district, and towards the end of the year arrangements were almost complete for three pupils, domiciled at the Manor Hospital, to work on the district.

Approximately half of the total number of births occur in hospital although mothers are encouraged to have their confinements at home wherever possible, and every assistance is given to them to this end. The demand for institutional confinement is, of course, largely due to the acute housing shortage and we feel sure that more women would have their confinements in their own homes if that course were possible. The Midwifery Service provides trained staff free of charge, together with free maternity outfits, and a personal relationship which means so much to the expectant mother. With the increase of staff which the Council have now approved it is hoped that the service will be of still further benefit to the mothers of the town.

The shortage of nursing staff in the Maternity Unit at Manor Hospital continues and it is still necessary for patients to be discharged to their own homes before the fourteenth day after confinement and our Municipal Midwives have continued the nursing of these patients at home. During the year 473 cases were attended.

We have again to record the excellent co-operation which exists between Manor Hospital and the extern Ante-Natal Clinics and to report that no difficulty has occurred in obtaining admission from the Clinics for any case judged to require hospital treatment.

Domiciliary Midwifery Service—1949
(including Nursing Homes)

	Domiciliary Midwives	Midwives in Nursing Homes	Totals
No. of Midwives practising in the Borough at the end of 1949 (exclud- ing Hospitals)—			
(a) Employed by the Council ...	16	—	16
(b) In private practice	—	4	4
	16	4	20
	Domiciliary Cases	Cases in Nursing Homes	Totals
No. of cases in the Borough attended by Midwives—			
(a) Employed by the Council—			
(i) As Midwives	878	—	878
(ii) As Maternity Nurses ...	364	—	364
(b) In private practice—			
(i) As Midwives	—	16	16
(ii) As Maternity Nurses ...	—	136	136
TOTALS { (i) As Midwives	878	16	894
(ii) As Maternity Nurses ...	364	136	500

HEALTH VISITING

Much attention has been paid during the previous year to building up the health visiting staff to meet our requirements. The Council have participated in a scheme of training for health visitors in conjunction with the Birmingham City Council, and up to the end of 1949 four of our students had successfully passed their examinations and returned to the department to take up duties as fully trained health visitors. In addition, two other students are taking the course in Birmingham and two prospective students are on the Walsall Clinic staff awaiting their entrance to the next course. We are grateful to the Birmingham City Health Department for their help in enabling us to build up our much depleted staff; the scheme at least ensures

a reasonable flow of trained health visitors into the department. It is almost hopeless to expect experienced trained health visitors to come to industrial districts such as Walsall, where the conditions of work are not always ideal and so we must perforce recruit our staff from local nurses and arrange for their training.

The training scheme, in brief, allows for the payment of the training fees, examination fees, and three-quarters of the minimum health visitor's salary whilst training in Birmingham. On return to the department the health visitor, after successfully passing her examination, gives a minimum of two years' service to the Council.

The authorised establishment at the present time is one superintendent health visitor and twelve health visitors, and proposals are before the Council for the increase of this establishment to sixteen fully trained health visitors. At the end of the year we were, for the first time in many years, beginning to approach our full establishment and to be able to organise our work on more stable lines.

It should be remembered that much of the time of the health visitor to-day is absorbed in social enquiries accentuated by shortages and deficiencies. For instance, enquiries by health visitors into housing conditions form a considerable part of their work, as do the personal enquiries into applicants for admission to maternity beds in the hospitals. These enquiries have to be carefully made in order that no injustice shall fall upon the applicant, but it should be remembered that the time spent on such work seriously affects the health visitors' real work, that of visiting homes where advice can be given on the health of infants, children and other members of the family. It is in the home where real contact is made with the health problems of the family and every endeavour must be made to see that the trained health visiting staff are given every facility to pursue this work and are not overwhelmed by the social enquiries, necessary though these may be.

At the end of the year the Council still employ three married trained nurses in a temporary capacity, and this additional trained nursing staff has enabled the work of the health visiting section of the department to proceed more smoothly. Such nurses carry out most of the routine clinic duties, which are a necessary part of our work.

During the year the department was glad to be able to offer facilities for ten students attending the Birmingham Health Visitors' Course to come to Walsall for a part of their practical training and every assistance was given to enable these students to cover as much of the work of the department as time allowed. We are glad to state that the students were deeply appreciative of the instruction they received in Walsall and the activities we were able to show to them, and were particularly impressed by the completeness of the work in a town of this size. In larger towns and cities the overall picture is not quite so readily seen.

During the summer months the staff concentrated on intensive home visiting to infants under six months of age in an endeavour to help check an epidemic of gastro-enteritis.

Table showing visits paid by Health Visitors

Expectant mothers		Children under one year of age		Children between the ages of one and five		Other Classes		Totals Visits
First Visits	Total Visits	First Visits	Total Visits	First Visits	Total Visits	First Visits	Total Visits	
673	742	2163	9770	—	14734	1263	2350	27596

HOME NURSING

The duty laid upon the Council to make provision for securing a nursing service for all persons who require nursing in their own homes is carried out by agreement with the Trustees of the Victoria Nursing Institution. The Institution provide the staff and a joint Committee of the Institution and the Council controls the Service. This arrangement is working quite well, and we are pleased to report an increase in the number of nurses employed, though this falls short of the actual requirements.

The staff at present consists of 1 Lady Superintendent, 5 full-time Nurses and 4 part-time Nurses. When the staff can be increased there is ample work awaiting them, and by this Service we hope to shorten the stay in hospital for some of the patients and thereby relieve these hard-pressed institutions. We also hope that, as the staff increases and includes certified midwives, it will be possible for the Victoria Nursing Institution to take over the care of such complications of the puerperium as Puerperal Pyrexia, etc., and so avoid members of the Domiciliary Midwifery staff being tied to one case. During the year 637 cases have been attended in their own homes, as against 290 in the previous six months, the period when the service first operated under the National Health Service Act. 26,282 visits have been paid by the Nurses to patients in their own homes, and it should be understood that many of the patients are long-standing chronic cases who require nursing over very long periods.

The question of the employment of a male district nurse is under active consideration, though the number of such nurses available is very small indeed.

VACCINATION AND IMMUNISATION

VACCINATION

During the year 412 Primary Vaccinations were carried out, 224 by doctors at the Infant Welfare Centres and 188 by General Practitioners.

There were 28 re-vaccinations and 21 unsuccessful vaccinations.

The following table shows the ages at vaccination and re-vaccination:—

	Under 1 year	1—4 years	5—15 years	15 years and over	Total
Vaccinated	206	167	20	19	412
Re-vaccinated ...	—	1	1	26	28

DIPHTHERIA IMMUNISATION

Arrangements are made at each of our Child Welfare Centres, Day Nurseries and School Clinics for the immunisation of children against Diphtheria. Visits are also paid to the schools for the immunisation of school children and for the administration of re-inforcing doses.

During 1949, 1,171 children under the age of five years and 1,167 between the ages of five and fifteen were immunised. In addition 2,111 children were given a re-inforcing dose.

Of the total, 250 children were immunised by private medical practitioners under the Authority's scheme, the remainder being immunised by the Local Health Authority's own medical officers.

It is estimated that approximately 36% of all children under the age of five years have been immunised.

Diphtheria Immunisation

Table showing number of children immunised each year,
by age groups

Year immunised	Under 5	5—14	Total	No. of children given re-inforcing injection	Cases of Diphtheria notified
1949	1171	1167	2338	2111	3
1948	1224	1238	2462	4314	3
1947	1089	725	1814	333	14
1946	957	1104	2061	598	18
1945	1144	1409	2553	}	34
1944	1136	1610	2746		76
1943	1567	2488	4055		196
1942	1708	2766	4474		201
1941	883	2233	3116		117
1940	106	1097	1203		58
Total	10985	15837	26822	9956	720

* Prior to 1946 2,600 children had received a re-inforcing injection.
Prior to 1940 10,835 children were fully immunised.

AMBULANCE SERVICE

The work carried out by the Ambulance Service has again expanded beyond anything that was envisaged when the service commenced and both vehicles and personnel are extended to the full. Some idea of the expansion will be gained when, by reference to the following table, it is seen that the mileage run during the year totalled 87,612. Last year, when we believed the maximum usage had almost been reached, the mileage run was 39,601. We think it is true to say that almost every sick person, whether a stretcher case or a case requiring sitting accommodation, has been carried by the Ambulance Service. A close watch is kept upon the possibility of abuse of the service, although we have little evidence of such misuse.

The mutual aid arrangements between neighbouring Authorities, whilst becoming unduly complicated at one period of the year, gradually settled down, and, in this district at any event, each Authority began to be responsible for the removal of its own cases to and from hospital. Negotiations for a final settlement of this rather complex problem are still proceeding and I am sure a sensible working arrangement will finally evolve. For the long distance journeys arrangements have been perfected for the transport of cases by train and the use of this method of transport will be extended as occasion demands.

During the year two sitting case cars were purchased and one ambulance was ordered to further augment the fleet. The Health Committee is, at the time of writing, considering the purchase of additional vehicles to replace some of the ambulances that have been in service for 12 and 14 years respectively. Delivery of new vehicles is still difficult so that requirements have to be judged at least 12 months ahead.

Five new garages have been built, together with a new workshop, and we now have ample accommodation for all the vehicles in service. The renovation of the Ambulance Depot has been ordered and the courtyard is to be resurfaced with tarmacadam, so that with the completion of this work the ambulance depot should be efficient in all respects.

The fleet at the time of writing consists of six ambulances and two sitting case cars, and at peak periods of the day the demands on the service are very heavy indeed and it requires the utmost ingenuity to ensure that any urgent accident case which might arise is not left uncovered. Every effort is made to avoid such a position arising, but with the comparatively small fleet and the demands made upon it there are times at the peak hours when all vehicles are engaged and a serious emergency accident would become quite a problem.

The Ambulance Service is utilised for the delivery of the gas and air analgesic apparatus, at the request of the midwives, to women in confinement and the 24 hour service which is available enables the apparatus to be delivered promptly upon request. 316 deliveries have been made throughout the year.

The staff now consists of one Ambulance Supervisor and 20 Ambulance Drivers, 5 of whom are women. The employment of women has proved to be of benefit, as they are often able to supply that personal touch with women patients which is so much appreciated. All members of the staff have successfully passed their St. John's examination and the Supervisor reports that an excellent spirit pervades their work. They are keen and jealous of the reputation of the Service, a quality to be commended.

The following table shows the work carried out by the Ambulance Service during the year:—

Month	Vehicles		CALLS					CASES					Mileage
	Amb.	Cars	Illness Amb.	Emergency Amb.	Other Amb.	Midwives Amb.	Total Calls	Illness Amb.	Emergency Amb.	Other Amb.	Midwives Amb.	Total Cases	
Jan.	6	1	912	48	10	—	1053	935	48	70	—	1076	5851
Feb.	6	1	851	54	2	—	983	875	54	64	—	1007	5453
March	6	1	988	64	—	—	1152	1019	64	89	—	1183	6598
April	6	2	805	55	—	—	942	844	55	59	—	980	5582
May	6	2	920	372	—	6	1414	951	375	91	—	1448	7863
June	6	2	836	422	—	6	1353	866	430	61	—	1391	8210
July	6	2	1047	303	—	—	1442	1067	304	63	—	1463	8320
Aug.	6	2	877	215	—	—	1195	898	215	70	—	1216	7679
Sept.	6	2	959	258	—	—	1312	1013	258	64	—	1366	7805
Oct.	6	2	1025	231	—	—	1437	1079	249	101	—	1509	8582
Nov.	6	2	1077	256	—	—	1424	1103	268	52	—	1462	8040
Dec.	6	2	1021	256	—	—	1408	1034	260	89	—	1425	7629
Total	—	—	11319	2534	12	12	15115	11684	2580	873	—	15526	87612

PREVENTION OF ILLNESS, CARE AND AFTER-CARE

Sick Room Appliances Service

From the end of January 1949, arrangements were made for Sick-Room Appliances to be made available, upon a certificate of a hospital, family doctor, district nurse, or health visitor. Sick-Room Appliances are issued on loan, free of cost, and the service has proved to be most beneficial.

The Appliances are housed at the Ambulance Station, the Ambulance Supervisor being responsible for the issue and return of all appliances and for the care and maintenance of all mechanical appliances. The Ambulance Station is a very suitable place for the issue of such articles, as a 24 hour service is ensured.

During the year the following issues were made:—

Rubber Sheets	...	...	...	124
Rubber Bed Pans	...	...	...	2
Back Rests	...	...	...	156
Urinals	...	...	...	69
Feeding Cups	...	...	...	6
Crutches	...	...	...	11 pairs
Air Rings	...	...	...	179
Stool Commodes	...	...	...	2
Spinal Carriages	...	...	...	2
Wheel Chairs	...	...	...	44
Steam Kettles	...	...	...	3
Walking Sticks	...	...	...	16
Air Beds	...	...	...	2
Bed Cradles	...	...	...	11
Bedpans	...	...	...	195
Sputum Cups	...	...	...	9
Bed Tables	...	...	...	4
Bed Boards	...	...	...	1 set

The Service first started in quite a modest way, but it was soon realised that a large demand existed for articles of this type, especially now that, with the shortage of hospital beds, so many patients have to be cared for at home. The public have proved to be very appreciative and we have received many expressions of gratitude for the help which this service gives. The provision of wheel chairs, for instance, is a great boon, for it is true to say that many old people have been taken out of doors for the first time for many years, and the demand for wheel chairs in particular continues to be very heavy. The Committee is determined to make this service a most comprehensive one so that anyone in need of an appliance shall be satisfied.

A small deposit is required for each article loaned and this is refunded when the article is returned to the Depot. In those cases where the patient is unable to arrange for the collection of the article, every endeavour is made to see that delivery is made by the Department's transport facilities.

Milk Assistance Scheme

The Health Committee, implementing their proposals for the care and after-care of tuberculous patients, instituted a scheme, in conjunction with the Tuberculosis After-Care Committee, for the supply of milk to tuberculous patients. Broadly the scheme provides for the free issue of one pint of milk per day where the total weekly incomes does not exceed an amount specified in the Council's scale. This scale was modelled upon that prepared by the Association of Municipal Corporations and the arrangements so far appear to be reasonably adequate.

During the year, 45 patients, for varying periods, have been supplied with one pint of milk per day, free of charge.

The total amount of milk supplied during the year was 1,327 gallons.

A grant of free milk is issued by the Department upon the certificate of the Tuberculosis Officer. Close liaison is maintained between the Tuberculosis Officer who, of course, is now an officer of the Regional Hospital Board, and this Department. The officers of the Tuberculosis Dispensary and of this Department confer regularly upon the needs of tuberculous patients. The Tuberculosis Health Visitor has an office at the Tuberculosis Dispensary and works with the Tuberculosis Officer. Contact is thereby maintained between the tuberculous patient and other activities of the Health Department.

Milk is supplied through the patient's own Registered Milk Retailer so that the patient is not put to any trouble to obtain milk through a special source, a benefit appreciated by the patients.

Provision of Clothing, Bedding, etc.

The Tuberculosis After-care Committee has continued its work on behalf of the Council. Extra assistance for the tuberculous patient in the form of additional food, change of air, clothing, better home conditions, extra beds and bedding, and more suitable occupation are the Committee's main activities. The Committee has functioned for many years and has been of great help to a large number of patients. Mainly the funds are derived from voluntary sources but the Council also make a monetary grant to assist the Committee in its good work.

The following is a summary of the help provided during the year:—

- 43 patients were given monetary grants to meet extraordinary liabilities.
- 52 patients were supplied with clothing.
- 32 patients were supplied with footwear.
- 15 patients were supplied with bedding.
- 6 patients were supplied with a bedstead.
- 6 patients electricity accounts were paid.
- 1 patient's arrears of rent were paid.
- 1 patient's insurance contributions, for the services of a domestic help, were paid.
- 1 patient had an electric plug for heating purposes fixed free of charge.
- 159 patients received the usual Christmas grant.
- Several distributions of food parcels were made to tuberculous patients by the British Red Cross Society.
- Handicraft materials were purchased for the use of tuberculous patients.
- Toys, games and books, kindly given by North Walsall Infants' School and also by the Vicar of Bloxwich, were distributed to many children of tuberculous patients at Christmas.

We feel this is worthwhile work for it helps the tuberculous patient to feel that he is not alone or forgotten and that there is always someone he can turn to when his difficulties appear to be insurmountable.

CONVALESCENT TREATMENT

Section 28 of the National Health Service Act, 1946 provides for the prevention of illness, care and after-care. Under these provisions the Local Authority may make arrangements to provide convalescent treatment for persons certified to require such treatment either by hospitals or by their medical practitioner. The convalescent treatment so provided shall not be given to persons needing medical care.

Towards the end of the year arrangements for convalescent treatment were under active consideration and it is hoped early in 1950 to commence a scheme by which a considerable number of school children will be sent to convalescent homes at the seaside and in the country and that a number of adults requiring convalescent treatment and not needing medical care, and recommended by the hospitals in the town, will also be sent to suitable homes.

TUBERCULOSIS

The following report has been supplied by Dr. F. J. Welton, now one of the Tuberculosis Officers of the Birmingham Regional Hospital Board. Dr. Welton still acts for the Council in all matters relating to environmental conditions of tuberculosis cases in the Borough and a part of his salary is paid by the Council. The report deals with this aspect of his work only.

“1949 was the first complete year of the new National Health Service; it will be remembered that the new Act came into force in July 1948 when the Tuberculosis Service came under dual control, diagnosis and treatment of tuberculous patients becoming the responsibility of the Hospital Service, based on Regional Boards, and prevention and after-care being left to the Local Health Authorities appointed by the Councils of Counties and County Boroughs. Over the country as a whole this dual responsibility has met with very varied success and its efficiency as a practical means of meeting the needs of tuberculous families is at present very much in doubt. In a closely knit county borough already possessing a vigorous Tuberculosis After-care Committee such as is to be found in Walsall, it was comparatively easy to put into effect the machinery provided by the Act. But in this Walsall has been much more fortunate than many other authorities. The local need now is to develop and expand the work of this Committee and still further allay the unfortunate and frequently tragic lot of the tuberculous family.

1949 marks the date when official recognition was given to the value of B.C.G. vaccine for building up resistance to tuberculosis in those found by the Mantoux test to be susceptible. This vaccine had long since proved its worth in millions of cases on the continent and overseas and its availability in this country is hailed with satisfaction by all Tuberculosis Officers.

Since there is now a definite means of dealing with susceptible cases, an impetus has been given to the work of contact tracing. Mantoux testing of contacts at the Dispensary was much increased during the year. Obvious other groups of the community to be tested are hospital staffs, and a good start was made among nurses at both the Manor and General Hospitals. By the end of the year it was becoming clear that, while most of the hospital staffs and Dispensary contacts were not susceptible to tuberculosis, there was a small percentage who were, and who were thus in need of careful observation and vaccination.

The work of the Tuberculosis After-Care Committee in providing for the material needs of tuberculous families proceeded steadily throughout the year and appropriate grants have been made from time to time for the welfare of the patients. Only the Dispensary staff, who are in close touch with these families, can fully appreciate what a large amount of very real suffering is alleviated in these cases.

The Civic Guild of Help and Citizens' Advice Bureau continued to carry out the work of investigation on behalf of the Committee and to report at the meetings. We are indebted to the Guild for their help.

Some idea of the work of the Committee may be obtained by reference to the report on the activities summarised in the section of the report dealing with Prevention of Illness, Care and After-Care.

The Committee is indebted to the Walsall Winter Convalescent Fund, the Sunday Cinema Fund, and the After-War Fund, for generous grants, of £50, and to the Co-operative Society for their continued support.

This year the sum of £359 18s. 6d. was raised by the Christmas Seal Sale, which represents a still further increase on the figure of the previous year. It is felt that the time must surely come when the proceeds of the Seal Sale show that the peak has been reached and that to expect further assistance from this most valuable source would be futile. It has been a source of considerable surprise and gratification that the upward trend of receipts has still continued and for the 1949 Seal Sale Walsall may be congratulated in providing the second largest total per head of population of all County Boroughs.

Any report on prevention and after-care work would be incomplete without mention of the close liaison existing between the Tuberculosis Dispensary and the Housing Department. Many are the requests for special consideration in these days of continuing acute housing shortage. Some are trivial, others are grave and need almost immediate attention. It is a pleasure to record the help and co-operation that has invariably been provided by the Housing Manager and his staff in dealing with the problem of rehousing tuberculous families. No Tuberculosis Service can be more fortunate in this respect than that in Walsall where the Housing Manager and his Committee have never failed to show active sympathy for families needing rehousing.

Having recorded with very real satisfaction all that has been done to alleviate the lot of the tuberculous family, whether by vaccination of susceptible contacts, the meeting of material needs or rehousing, it still remains to be stressed that there exists in our midst a widespread and grave amount of human suffering. That this is now more capable than ever before of alleviation only serves to spur us on to further effort. If this is forthcoming and sustained by all concerned there is no doubt that the tragedy of tuberculosis may be wiped out in the coming generation."

MASS RADIOGRAPHY SURVEY

During March and April, the mobile X-ray Unit visited Walsall, when the opportunity was afforded to adults and school children to have an X-ray examination of their chests. The response was quite satisfactory, 11,158 films being taken, 0·8% being referred for further investigation.

A total of 9,495 adults (5,499 males and 3,996 females) attended. Of the total, 421 or 4·4% were found to have some abnormality or disease of the chest which required no treatment, or who were referred to their private doctors. A further 86 were referred to the Tuberculosis Dispensary for further investigation and possible treatment.

	Males	Females	Total
Congenital abnormalities of Lungs or Thorax	27	22	49
Cardio-Vascular lesions	6	9	15
Non-tuberculous conditions	81	22	103
Tuberculosis, inactive or healed	145	109	254
Referred for further investigation	43	43	86
	—	—	—
Totals	302	205	507
	—	—	—

A total of 1,663 school children (796 boys, 867 girls) were X-rayed by Miniature Radiography. Of the total 17 (5 boys, 12 girls) were found to have some abnormality or disease of the chest which required no treatment, a further 3 were referred to the Tuberculosis Dispensary for further investigation.

	Boys	Girls	Total
Congenital abnormalities of Lungs or Thorax	—	4	4
Cardio-Vascular lesions	—	2	2
Non-tuberculous conditions	2	1	3
Tuberculous, healed or inactive	1	7	8
Referred for further investigation	2	1	3
	—	—	—
Totals	5	15	20
	—	—	—

Of the 89 cases referred to the Tuberculosis Dispensary for further investigation, 70 (38 males and 32 females) attended. Of these 18 males and 11 females were found to be suffering from Pulmonary Tuberculosis in an active form and 5 males from inactive Pulmonary Tuberculosis. The remainder, 15 males and 21 females, were non-tuberculous.

Of the 29 active cases, 8 males and 3 females had a positive sputum, 10 males and 8 females either a negative sputum or no sputum at all.

12 males and 5 females were subsequently admitted to the Sanatorium for treatment and the remainder kept under observation.

DOMESTIC HELP SERVICE

The Domestic Help Service, commenced during 1947, has continued to do excellent work. The number of Domestic Helps employed has slightly increased and at the end of the year 15 women were employed. The greatest care is taken in the selection of women employed in this Service and on the whole the standard of help employed is reasonably high.

Usually the demand for Domestic Help exceeds the supply of suitable women. In these circumstances first priority is always given to cases of confinement and care is taken to ensure that an expectant mother reserving Domestic Help is guaranteed the services of such a Help without question.

In many cases where expectant mothers apply for admission to hospital for their confinements they do so because there is not a suitable person at home to take care of the household whilst they are confined, and in such cases the Domestic Help Service is utilised to the full, thereby relieving the strain on the maternity hospital accommodation.

Cases of sickness, owing to the shortage of Domestic Helps, do not fare quite so well, but these cases are supplied with help whenever possible. Very frequently we are asked to supply Domestic Help for cases of chronic sickness and, whilst we make every endeavour to help these people, by the very nature of the short supply of Helps there must be periods when we are unable to supply such help. Administratively, care has to be taken not to tie up Domestic Helps on these chronic cases to the detriment of the confinement and short illness case, but on the whole the balance has been well held throughout the year.

One of the greatest aims of the Service has been to make it a very personal and human one, and this spirit has been fostered and encouraged in our Domestic Helps. We have many instances of the staff showing kindness and consideration outside their official requirements, and we are sure that it is this approach which makes the Service so popular. On the whole there is a deep appreciation of the assistance given.

The difficulties of gauging the requirements of the Service are many. Like all personal services there is at one time a sudden demand for Domestic Helps and a lack of staff, at another time the position is reversed and there are too many Helps and not enough cases, but on the whole we have been fortunate throughout the year in marrying the requirements to the staff, and there have been few days on which retention fees have had to be paid to Helps, the number of such days in 1949 being 187. At the same time, some of the Helps who have been engaged continuously for long periods are not averse to having a break in order that they may pay some attention to their own domestic affairs and prepare themselves for anything which may occur at the next case they attend.

The following are the statistics for the year:—

No. of Helps employed during the year	27
No. of Helps employed at 31st December, 1949 ...	15
No. of confinement cases at which help was supplied	74
No. of other cases at which help was supplied ...	63
Total hours worked at confinement cases	8,377
Total hours worked at other cases	13,392

MENTAL HEALTH

The outstanding feature of the work of caring for the mentally ill during the year has been the number of voluntary patients admitted to St. Matthew's Hospital, Burntwood, 81 cases being admitted as against 16 only in the previous six months. Whilst there may be certain disadvantages in this procedure it is, on the whole, a practice to be encouraged in that patients themselves seek voluntarily the treatment which will help them to take their normal place in the community.

The staff concerned with mental health consists of one whole-time Authorised Officer, one Deputy Authorised Officer (part-time) and two Mental Welfare Officers, the latter being mainly concerned with the care of mental defectives.

The following table shews the number of cases dealt with during the year:—

No. of Health Service Certified patients removed to Saint Matthew's Hospital, Burntwood	41
No. of Health Service Voluntary patients admitted to Saint Matthew's Hospital, Burntwood	81

No. of Health Service cases, alleged to be of unsound mind, investigated	41
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No. of patients referred for after-care	72
---	-----	-----	-----	----

No. of after-care visits paid	181
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In addition various other enquiries regarding patients have been dealt with.

As stated in the Report for 1948, considerable thought was given to the question of after-care visits, and it was decided to arrange for this work to be done by members of the Health Visiting staff. Experience has proved that this decision was a wise one for it has been found that much more sympathetic contact can be established with patients discharged from mental hospitals rather than by the after-care work being undertaken by the Duly Authorised Officers, who have been concerned in the patient's removal in the first instance.

The Health Visitors' reports indicate that most of the visits they pay are successful, although some patients are still difficult and need several visits before the necessary confidence between visitor and patients is established. It will be appreciated that these visits take considerable time and patience, but we feel that the time spent is very well worth while.

Quite a number of patients have been assisted to resume their employment and some have been assisted to obtain employment more suited to their capacity. In many cases the Authorised Officer has been instrumental in obtaining financial assistance and in smoothing the way for them to receive financial help without embarrassment. Friendly contact is the keynote of this service and we are satisfied with the progress made in helping those persons suffering from mental ill health.

MENTAL DEFECTIVES

The tables given at the end of this Section of the Report show the total number of ascertained mental defectives in the Borough and the ascertainment of such persons during 1949, together with other information relating to the care of the mentally defective.

During 1949 the Mental Welfare Officers paid 1,148 visits and held 1,225 interviews in connection with these cases.

ST. MARGARET'S HOSPITAL, GREAT BARR PARK

There are 262 Walsall patients in St. Margaret's Hospital, Great Barr Park (formerly Great Barr Park Colony). The Mental Welfare Officers continue to be responsible for furnishing reports as follows to the Medical Superintendent of St. Margaret's:—

- (a) Reports on home conditions for leave of absence;
- (b) Reports on home conditions for trial on licence and discharge from Order;
- (c) Reports to the Visitors for the County of Stafford;
- (d) Periodic Reports on patients on licence.

54 patients are on licence in various parts of the country, of whom 42 are supervised by the Mental Welfare Officers.

The Mental Welfare Officers continue to find employment for patients who are considered suitable for licence, and to supervise them afterwards. The supervision of these patients, particularly the girls, takes a considerable amount of visiting time, but in view of the serious shortage of hospital accommodation it is felt that this work is well worth the effort it takes, as it frees beds for urgent cases who are awaiting admission. In passing, it must be noted that Walsall still has a waiting list for admission to St. Margaret's Hospital.

During the year eight Walsall cases were discharged from their Order under the Mental Deficiency Acts, in addition one case "lapsed by operation of law" and was an absconder who has since married. Of these cases one was admitted to the Royal School for the Deaf, Edgbaston, having improved sufficiently to be considered of "average" intelligence. These cases are doing fairly well, and are seen at intervals by the Mental Welfare Officers, visiting in a voluntary capacity.

The Senior Mental Welfare Officer again accompanied a party of girls from the Colony for a week's holiday to the Y.W.C.A. Hostel, Rhyl.

The co-operation between the Medical Superintendent (Dr. Macmillan), the Matron (Miss Meldrum), the Colony Staff and the Mental Welfare Officers is sustained, and greatly appreciated.

OCCUPATION CENTRE

The Occupation Centre continues to do good work for the children who cannot be educated within the Educational System, and it should be observed that the emphasis is on "training"—not filling in time.

The Junior children attend the Occupation Centre daily from 10 a.m. to 3 p.m. A hot meal for which they pay 4d. is provided at mid-day and they receive free milk each morning.

The Senior Girls' Class meets on Tuesdays and Thursdays from 2 p.m. to 4 p.m. and a cup of tea and a small cake are provided for them. The girls are now baking their own cakes under the supervision of the Centre Cook.

The Senior Boys' Class meets on Mondays and Wednesdays from 2 p.m. to 4 p.m. and the boys also have a cup of tea.

The Senior Girls and Boys now have 1s. a week pocket money, provided their attendance at their classes is good.

Rug-making, stool seating, embroidery, elementary handicraft, percussion band, eurythmics, country dancing, puppetry, games and speech training form part of the curriculum of this flourishing Centre. A number of small children were admitted during the year, and the kindergarten group is growing rapidly in size.

The usual Summer Outings were organised to Southport and Milford and in addition a week's holiday at the National Association for Mental Health Holiday Home at Walmer was enjoyed by a party of boys from the Occupation Centre. A delightful holiday was spent in perfect weather, and we are again indebted to the Sunday Cinema Licensing Committee for a handsome donation which made these trips and holiday possible. The boys and girls have joined a Holiday Club organised by the Supervisor.

The Christmas Parties were again a feature of the Winter Session.

Five Students from the Supervisor's Course of the National Association for Mental Health spent several weeks at the Centre during the year and more Students are expected for training. One Student came from Eire and one from India—both are pioneers from these countries. Our Centre is considered to be a good training ground.

During the year the sum of £17 0s. 10d. was received from the sale of work made at the Occupation Centre.

The children continue to use the School Clinic and at the end of the year all the children were medically examined by one of the Assistant Medical Officers. Free 'bus passes to and from the Occupation Centre are provided and our thanks are expressed to the Transport Committee for extending this privilege to the children.

MENTAL WELFARE ASSOCIATION

The Senior Mental Welfare Officer is the Secretary of this Association, and she and the Mental Welfare Officer are responsible for the work undertaken by the Association. There is a large number of Voluntary patients on the register, and the Association is serving a useful purpose in supervising cases which do not come within the purview of the Statutory Committee.

There are 141 children on the Education Register as attending, or recommended for, Special Schools, and the homes of these children are visited from time to time.

Reports are sent to the Education Authority each quarter, and the homes are visited and reported upon before the children attending Special Residential Schools go home on holiday. The shortage of Special School facilities is still a most serious handicap to the proper education of those children who are found to be educationally subnormal, the placing of suitable girls in Special Schools being especially difficult.

It is felt keenly that the absence of a Day Special School for boys and girls is depriving these educationally subnormal children of the education which was envisaged by the Education Act, 1944, which provided for education according to a child's needs.

GENERAL

The Senior Mental Welfare Officer is again a member of the Executive Committee of the Association of Mental Health Workers, and will attend quarterly meetings of the Committee in London.

During the year, a number of the Nurses taking the course for the Health Visitor's Certificate in Birmingham have each spent a day in the Mental Welfare Department and Occupation Centre and have expressed their gratitude for the permission granted to see this section of the Health Services.

During the year the Mental Welfare Officers and the Staff of the Occupation Centre arranged a Whist Drive for funds for the Occupation Centre Outings, which raised £13 14s. 0d., and held a Jumble Sale which realised £23.

A Collecting Box is now kept in the Occupation Centre (at the suggestion of the parents of the children) and is emptied at intervals with gratifying results.

During the year the Mental Welfare Officers have, as formerly, given evidence at Juvenile Courts, Quarter Sessions and Police Courts in connection with defectives who appear before these Courts, and the co-operation between the Police and the Officers, as well as with other Social Agencies, is excellent.

The Mental Welfare Officers and the Supervisor of the Occupation Centre desire to express their gratitude to the Committee for sending them to the Annual Meeting of the Association of Mental Health Workers which was held at Clacton-on-Sea in the Spring.

The Chairman and Senior Mental Welfare Officer attended a two-day Conference in London, organised by the N.A.M.H.

The Health (Mental Health Case) Sub-Committee, Dr. Clark and the Senior Mental Welfare Officer visited Newcastle-under-Lyme Occupation Centre, especially built as such, and were entertained by the County Medical Officer of Health, Dr. Ramage and the County Mental Welfare Officer, Miss F. H. Tosh.

Plans for a new Occupation Centre in Walsall are in preparation.

A Board of Control Inspector visited the Department during the year.

During the year the Health (Mental Health Case) Sub-Committee accepted an invitation from the Chairman and Medical Superintendent of St. Margaret's Hospital to visit the Hospital to see the Walsall patients. A tour of inspection was made during which the Committee saw much of interest, and expressed their satisfaction with the arrangements for the care and training of the patients. An excellent lunch and tea, added greatly to the enjoyment of the visit.

TABLES SHOWING PARTICULARS OF MENTAL DEFECTIVES DURING 1949

Number of Ascertained Mental Defectives found to be "Subject to be
dealt with"

		M.	F.	T.
(a)	In Institutions (including cases on licence therefrom) { Under 16 years of age ... Aged 16 years and over ...	9 120	17 173	26 293
(b)	Under Guardianship (including cases on licence therefrom) { Under 16 years of age Aged 16 years and over	— 4	— 2	— 6
(c)	In "places of safety"	—	1	1
(d)	Under Statutory Supervision (excluding cases on licence) { Under 16 years of age Aged 16 years and over	15 47	17 68	32 115
(e)	Action not yet taken under any one of the above headings	2	—	2
TOTAL ascertained cases found to be "subject to be dealt with"		197	278	475
No. of cases included in (b) to (e) above waiting removal to an institution		1	—	1

Number of Mental Defectives not at present "Subject to be dealt with" but over whom some form of voluntary supervision is maintained—

Under 16 years of age	—	—	—
Aged 16 years and over	262	190	452
Total ...	459	468	927

Number of Mental Defectives Receiving Training

		M.	F.	T.
(a)	In day-training centres { under 16 years of age aged 16 years and over	11 12	11 24	22 36
(b)	At Home	1	—	1
Total ...		24	35	59

PARTICULARS OF MENTAL DEFECTIVES ASCERTAINED DURING THE YEAR 1949

	M.	F.	T.
(1) ASCERTAINMENT			
(a) Cases reported by Local Education Authorities (Section 57, Education Act, 1944):—			
(i) Under Section 57(3)	3	5	8
(ii) Under Section 57(5)	1	1	2
(b) Other cases reported during 1949 and ascertained to be “subject to be dealt with”	5	3	8
Total cases ascertained to be “subject to be dealt with” during the year	9	9	18
(c) Other cases reported during 1949 who are not at present “subject to be dealt with” but for whom the Local Health Authority may subsequently become liable	7	3	10
Total number of cases reported during the year ...	16	12	28
(2) DISPOSAL OF CASES REPORTED DURING THE YEAR			
(a) Cases ascertained to be “subject to be dealt with”			
(i) Admitted to Institutions (by order) ...	2	2	4
(ii) Placed under Guardianship (by order) ...	—	—	—
(iii) Taken to “places of safety”	—	1	1
(iv) Placed under Statutory Supervision ...	5	6	11
(v) Died or removed from area	—	—	—
(vi) Action not yet taken	2	—	2
Total ...	9	9	18
(b) Cases not at present “subject to be dealt with”			
(i) Placed under Voluntary Supervision ...	7	3	10
(ii) Found not to be defective	—	—	—
(iii) Died or removed from area	—	—	—
(iv) Action not yet taken	—	—	—
Total ...	7	3	10

**NUMBER OF MENTAL DEFECTIVES UNDER COMMUNITY CARE
INCLUDING VOLUNTARY SUPERVISION OR IN "PLACES OF
SAFETY" ON 1st JANUARY, 1949, WHO HAVE CEASED TO BE
UNDER ANY OF THESE FORMS OF CARE DURING 1949**

						M.	F.	T.
(a)	Ceased to be under care	...	...	...	...	—	2	2
(b)	Died or removed from area	...	...	...	...	—	2	2
						<hr/>		
					Total	...	—	4
						<hr/>		

**OF THE TOTAL NUMBER OF MENTAL DEFECTIVES KNOWN TO
THE LOCAL HEALTH AUTHORITY**

(a)	Number who have given birth to children during 1949:—						
	(i) After marriage	...	...	...	...	...	1
	(ii) While unmarried	...	...	...	...	...	—
							<hr/>
						Males	Females
(b)	Number who have married during 1949	...	...	...	...	—	1

COUNTY BOROUGH OF WALSALL

ANNUAL REPORT

OF THE

Chief Sanitary Inspector

ON THE

Sanitary Administration of the Borough
for the year ended 31st December, 1949.

TO THE MAYOR, ALDERMEN AND COUNCILLORS OF THE COUNTY
BOROUGH OF WALSALL

Mr. Mayor, Ladies and Gentlemen,

I beg to submit my Annual Report for the year 1949, giving particulars of the sanitary administration of the Borough.

With the introduction of the National Health Service and the transfer of certain local government functions to nationalised bodies, the last few years has seen a gradual change in the duties and responsibilities of local authorities, but so far as the environmental hygiene services are concerned, the prospect is one of extended activities, intensification of purpose and increasing endeavour.

The housing situation improves very little. There is still no possibility of routine reconditioning which was a major responsibility before the war. The Department's immediate housing concern is to attempt the maintenance of progressively declining properties by securing the execution of necessitous repairs. This policy is, unfortunately, dictated by the circumstances of the times, as the present rate of building is far from sufficient to allow the clearance of houses which should have been demolished years ago.

The number of condemned houses in occupation was reduced from last year, but it is doubtful whether this reduction would show favourable comparison with the wastage caused by depreciation and lack of maintenance of other properties. Although housing repair work was slightly easier than last year, the difficulties of scarcity of certain materials, and shortage of labour still remain, and will continue while priority is given to new building. The ever rising cost of repairs is a further complication, as "reasonable expense" is dependent on two factors, the cost of repairs and the value of property.

Work in connection with food administration was extended during the year to the limits of available staff. Food premises were considerably improved and increasing demand was made on inspectors' time by duties of meat inspection. It should be pointed out, that, as the meat position improves, the tendency will be for these duties to increase and the time should not be far ahead when the whole question of slaughtering and meat inspection facilities will have to be reconsidered. A statement by the appropriate Government Department on future slaughtering policy is felt generally to be necessary, so as to enable local authorities to prepare and put into operation plans of reconstruction. Reference to the report will indicate that there is still a large quantity of meat which has to be condemned because of its diseased condition and its unfitness for food. I have reported in some detail this year as to the analysis of condemnations, in the hope that the information provided will be of use to indicate the need for improvement in animal health.

The atmospheric pollution section of the report shows that steady progress has been made on what must be admitted to be a difficult job. It should be stressed that there is no easy solution to this problem. A progressive outlook, persistent effort furthered by good relations with industry, the particular help of other Corporation Departments and the full co-operation of all concerned, including householders, is the only way to drastically reduce pollution of the atmosphere.

PART 1.—STAFF

The position regarding staff now appears to be reaching a stage of stability, only one sanitary inspector and one temporary clerk resigning their appointments during the year. The movement of staff generally has become restricted, this being due no doubt to the difficult housing situation; the sanitary inspector who took up a new appointment did so to secure housing accommodation.

Mr. S. Monks was appointed to the vacancy created by Mr. Beeby's resignation, and Mr. V. F. Penn and Mr. K. H. Perry were appointed to newly established posts of sanitary inspectors.

In August, Mr. R. Davies, clerk, returned to the Department after service with the Armed Forces.

Mrs. M. R. Davies resigned from the post of clerk and has left the Local Government Service.

Mr. R. C. Drake, appointed as a junior clerk in 1948, was established as a student sanitary inspector to serve under the Chief Sanitary Inspector.

Mr. G. A. Lavender, who was granted leave of absence last year to attend the post-war training course for sanitary inspectors, successfully concluded his course by passing the examination of the Royal Sanitary Institute and Sanitary Inspectors' Examination Joint Board. He has now secured an appointment as a sanitary inspector with an adjoining authority.

Mr. J. F. Marshall, District Sanitary Inspector, was successful at the examination of the Royal Sanitary Institute for Smoke Inspectors, held in Leeds in July.

Post War Training of Sanitary Inspectors

After the termination of hostilities, there existed a serious shortage of sanitary inspectors. To meet the deficiency a special scheme was arranged by the Ministry of Health, the Ministry of Labour and National Service and the Ministry of Education, to secure the supply and training of sanitary inspectors in the post-war period.

Selection panels were constituted to interview applicants from the Services, and to arrange with the Education Authorities for the setting up of an organization to carry out the approved training scheme. The course, which was full-time, was restricted to fifteen months training, and included six months practical work in Health Departments of Local Authorities.

It will be remembered that when the co-operation of local authorities was sought in 1947, Walsall, together with many other local authorities, gave full support to the scheme. Since its inauguration some 1,000 students have passed through the Course, approximately 50 of these being in connection with the Birmingham scheme. 16 students attended the Walsall office for instruction in the practical duties of sanitary inspectors' work, all of whom expressed appreciation of the way in which they were received, and of the excellent instruction which was arranged for them.

As it was considered towards the end of the year that the purpose for which the scheme was introduced no longer maintained, a letter was circulated to all local authorities who had taken part, giving notice of the termination of the scheme, and expressing the thanks of the Ministries concerned.

PART 2.—HOUSING

This section of the Report embodies all housing work carried out both under the Public Health Act, and the Housing Act.

Repairs to Houses

It has not yet been possible to reintroduce routine house to house inspection or any reconditioning work under the Housing Acts. Complaints numbering 2,854 during the year were given prompt attention and all urgent work was, where possible, dealt with by the special powers granted by the Health Committee for such cases. The number of complaints is somewhat less this year compared with 1948, this probably being due to the exceptionally good weather experienced during the year.

The difficulty in securing property repairs still maintains, as priority for new building, both as regards materials and labour, results in a shortage for house maintenance. The high cost of repairs compared with the value of occupied house property is an important limiting factor on the extent to which legal demands can be made for an extensive repair programme.

The total number of visits made to all premises for the purpose of sanitary administration was 19,766. In addition to action instituted under the Public Health Act for non compliance of notices, 729 houses received attention for principal repairs and in 973 cases work was carried out in connection with water closet and ashbin accommodation, drainage repairs and abatement of other nuisances, a total of 1,702 houses being improved during the year.

Legal Proceedings

It was found necessary to institute legal proceedings with respect to non-abatement of nuisances in three premises, details of which will be found in part 8 on page 99 of the report.

Execution of Work in Default of Owners

In addition to legal proceedings referred to on page 99 repairs to 4 houses were carried out by the Corporation in default of the owners at a cost of £71 2s. 2d. This work was given to building contractors after tenders had been invited.

Ashbins have been supplied by the Corporation to 26 houses in default of the owners at a cost of £31 3s. 3d.

Closing and Demolition of Unfit Houses

At the 31st December, 1948, there were 362 houses in respect of which Housing Orders were operative, still in occupation, and during the year the Health Committee made individual Demolition Orders

in respect of a further 14 houses. 62 unfit properties were closed during the year prior to being demolished and there remains a total of 314 officially condemned houses still in occupation at the 31st December, 1949. A large number of these unfit properties are now owned by the Council who carry out essential repairs when they are required. These Council owned properties are often used to house families from other dilapidated condemned properties which are past reasonable repair. Progress in the clearance of these officially condemned houses remains however very slow and will continue so at the present rate of house building, and the Council will seriously have to consider how much longer they can continue to have in occupation houses, many of which have been condemned as unfit for habitation upwards of 10 to 12 years.

A Sub Committee of the Health Committee have paid visits to certain houses before they were dealt with officially as unfit and this practice will continue to be carried out with respect to seriously deficient properties.

Housing Act, 1949

The Housing Act, 1949 received the Royal Assent in July, 1949, and Sections 2, 3, 10, 20, 21, 22, 23, 24 and 29 have been delegated to the Health Committee. These provisions include arrangements for the granting of financial assistance to owners who are prepared to make their houses fit in all respects for human habitation, works to include the provision of bath rooms, hot water supplies, additional bedrooms, etc. There are of course conditions to be fulfilled before a grant is made, among these being that the houses are to be made fit in all respects, must have a minimum life of 30 years, and that the cost of improvement works is to be between £100 and £600.

It is disappointing to have to report that only two enquiries for grants were received. Advice was given in both cases, but proposals in the proper form stipulated by the Act have not been forthcoming.

Reports are submitted from time to time to the Housing Manager of overcrowding cases coming to the notice of the Department and of cases where families are living and sleeping in one room.

In my report for 1948, I mentioned the necessity for redeveloping complete areas which are suitable for clearance and replanning. In the older parts of the town it is regretted that it has not been possible to progress appreciably with any development scheme. Consideration has however been given to the replanning of one area and proposals are likely to be prepared at an early date for the construction of flats which should lead to a gradual elimination of these most unsatisfactory properties.

Common Lodging Houses

The position that I reported on in 1948 with regard to Common Lodging Houses unfortunately remains static, and the necessity for the provision of additional satisfactory hostel accommodation thus remains a problem of the highest importance.

Housing Statistics

A statement setting out the number of new houses provided, the position with regard to condemned properties and progress under the Housing Acts is appended as follows:

Provision of New Houses

During 1949, new houses were provided as follows:—

(a) By the Walsall Corporation:				
Permanent Aluminium Bungalows	...			88
Post-War Permanent Houses	...	...		362
(b) By Private Persons:				
Permanent Houses	...	...	...	153
New Dwellings from conversions of existing properties	...	...	...	15
Total				618

Progress in the Clearance of Unfit Properties

No. of condemned houses occupied at 1st January, 1949	...	...	...	...	362
No. of houses for which Demolition Orders or Closing Orders were made or Undertakings accepted during 1949	...	...			14
No. of condemned houses closed during 1949	...	...	...	...	62
No. of condemned houses demolished during 1949	...	...	...	...	74
No. of condemned houses still occupied at 31st December, 1949	...	...	...		314

Progress under the Housing Acts 1930 and 1936 to 31st December, 1949

Houses represented as unfit	...	...	...	3,100
Houses closed	...	...	...	2,651
Houses demolished	...	...	...	2,478
No. of persons displaced	...	...	...	11,638

PART 3.—FOOD

Food inspection is a vital service and the conditions in which food is prepared, stored and sold, is no less important. The supervision of all foods in all stages of preparation, distribution and manufacture is the Sanitary Inspector's responsibility and the health of the community depends in no small measure upon the efficiency of the Local Authority's food administration services. Duties in this connection have increased considerably in the last few years and the work carried out by the Department during the year under review is given in some detail, and has been dealt with under the following sub divisions:

- (a) Inspection of Meat;
- (b) Unwholesome Food Condemned;
- (c) Milk;
- (d) Ice Cream;
- (e) Food Hygiene;
- (f) Sampling—Food and Drugs Act, 1938.

(a) INSPECTION OF MEAT

The slaughtering of animals at the Ministry of Food Controlled Slaughterhouse in Shortacre Street, continued during 1949.

There was a sharp increase in the number of animals slaughtered, namely 51,987 as compared with 38,597 in 1948. There were increases in all types of animals, the most marked being with respect to sheep and lambs and it is interesting to record that 561 pigs were slaughtered as compared with 105 in 1948.

Mr. A. D. Kelley, Meat Inspector, is in constant attendance at the abattoir and other members of the staff who are qualified as Meat and Other Foods Inspectors, undertook rota duty. In order to maintain an adequate inspection service, it has been necessary to have two Inspectors on duty while slaughtering is carried on and at peak periods additional help had to be provided.

I commented in 1947 and 1948 as to the trend in the instance of animal diseases and details of the percentage of animals affected with diseases are set out hereunder. The amount of diseased meat and offals condemned as unfit is slightly less than in 1948, which is encouraging, particularly having regard to the increased number of animals slaughtered and examined.

Year	Percentage of animals affected with disease					
	All diseases except Tuberculosis			Tuberculosis		
	Cattle except cows	Cows	Calves	Cattle except cows	Cows	Calves
1940	31.70	44.40	1.00	12.50	47.40	.50
1941	20.67	30.33	.75	15.36	54.40	.81
1942	19.20	40.04	.79	14.05	45.95	.60
1943	19.94	42.39	.58	15.07	48.56	.44
1944	17.89	39.20	.45	13.81	49.84	.38
1945	38.05	53.39	.96	14.55	50.40	.58
1946	46.83	68.15	.68	17.47	48.70	.62
1947	53.68	72.67	1.75	17.51	53.75	.68
1948	58.93	91.61	3.40	14.96	55.19	.54
1949	49.91	96.72	3.39	13.51	48.24	.428

From the above table it will be seen that the percentage of cattle affected by diseases other than Tuberculosis shows a decrease, while the percentage of calves affected remains about the same. There was a slight reduction in the percentage of cattle, excluding cows, affected with tuberculosis, but the percentage of cows affected with tuberculosis and of other diseases, was the highest ever recorded.

Cysticercus Bovis

Detailed attention has had to be given during the year in the examination of cattle and cows with respect to *Cysticercus Bovis* infections and the following Table sets out the position with regard to the number of cases of *Cysticercus Bovis* with details showing the location of cysts:

Animals	Masseter muscle of head	Tongue	Heart		Skirts	Carcase Muscles
			Muscle	Surface		
Bullocks ...	20	—	13	6	1	—
Heifers ...	10	—	13	5	—	—
Cows ...	13	2	11	8	—	—
Bulls ...	—	—	—	—	—	—
Total	43	2	37	19	1	—

Total number of carcasses infected with *Cysticercus Bovis*, 71.

All infected offals were condemned. After a careful examination of the carcase muscles the carcasses were refrigerated for a period of 21 days as an extra precautionary measure before being released for human consumption to manufacturers of meat products in accordance with the Ministry of Food instructions DMW/1/478.

Notes

Cysticercus Bovis was at one time considered to be almost extinct in Great Britain, but during the immediate post war years, it has been found to be on the increase. This may be due to the introduction into British agriculture of persons from European countries in which this disease is prevalent. All cases of *Cysticercus Bovis* are now notified to the Ministry of Food for appropriate action.

Calves affected with Congenital Tuberculosis

The Meat Inspector reports that 24 calf carcasses were condemned affected with congenital tuberculosis. In 13 of these cases it was possible to trace the ownership of the calves and details of the post-mortem examination were forwarded to the Divisional Veterinary Inspectors of the Ministry of Agriculture and Fisheries. 6 cases were reported to the Staffordshire Animal Health Division and information was received that in 2 cases the dams of the calves had died and in the other 4 cases the dams were slaughtered under the Tuberculosis Order. No reports have been received from other Ministry of Agriculture Animal Health Divisions with respect to any possible action.

The Health Committee were pleased to receive a report from the Staffordshire Divisional Inspector of the Ministry of Agriculture and Fisheries, expressing appreciation of the co-operation given by the Health Department in supplying information regarding calves infected with congenital tuberculosis. It was further stated that as a result of this co-operation, many cases of tubercular infection had been traced which otherwise would not have come to the notice of the Ministry.

Casualty Animals

The following Table sets out the position with regard to casualty animals:—

SLAUGHTERED AT ABATTOIR.

Cattle, 26; Sheep, 9; Pigs, 112; Calves, 12. Total, 159.

SLAUGHTERED ON EMERGENCY PREMISES AND
ARRIVING DRESSED AT ABATTOIR.

Cattle, 11; Sheep, 28; Pigs, 42; Calves, 1. Total, 82.

Total casualties for the year 1949 were 241 of which 27 carcasses, 17 part carcasses and 249 organs were condemned on inspection by Meat Inspectors.

Bone Taint

1,005 lbs. of imported meat and 1,108 lbs. of home killed meat was condemned during the year for bone taint.

Dressed carcasses received at Abattoir for allocation

During the year, 83 cattle carcasses, 20 sides of beef, 103 calves, 804 sheep, 107 pigs and 148 pigs heads were received at the Abattoir in a dressed condition and were inspected before redistribution.

Meat condemned affected with bruising

The Meat Inspector has again called particular attention to the fact that during the year some 2,945 lbs. of carcase meat has had to be condemned because of its bruised condition, apparently due to damage to the animals during transit. This is a matter which continues to require attention and indicates that much greater care is necessary in the handling and transport of animals from the markets to the slaughterhouse.

Transport of Meat

It is pleasing to be able to report that all transport for delivery of meat from the Abattoir to the retail shops is now equipped with hanging rails and all fresh killed meat is now transported in reasonably satisfactory conditions. Improvements can still be effected in the actual delivery of meat from the vehicles to the shops.

Meat and Food Inspection Statistics

Tables setting out the number of carcasses inspected, together with particulars of carcasses or parts thereof condemned, the weight of diseased meat and offals and analysis of condemnations with respect to cattle, cows, calves, sheep and pigs, also a Table setting out the total quantity of unwholesome food condemned, is appended herewith.

The following table sets out the number of carcasses inspected, together with particulars of carcasses or parts thereof condemned, and is in the form required by the Ministry of Health.

1949

	Cattle excluding cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed and inspected	5,349	3,331	7,930	34,816	561
ALL DISEASES EXCEPT TUBERCULOSIS					
Whole carcasses condemned	5	45	156	59	17
Carcasses of which some part or organ was condemned ...	2,665	3,177	113	2,943	224
Percentage of the number in- spected affected with all diseases except tuberculosis	49.91%	96.72%	3.39%	8.62%	42.95%
TUBERCULOSIS ONLY					
Whole carcasses condemned	14	171	24	Nil	6
Carcasses of which some part or organ was condemned ...	709	1,769	10	Nil	125
Percentage of the number inspected affected with tuberculosis	13.51%	58.24%	.428%	Nil	2.33%

(Total number of carcasses examined 51,987)

Diseased Meat and Offals

During the year the following quantities of meat and offals were found to be diseased, unsound and unfit for human consumption:—

ALL DISEASES

EXCEPT TUBERCULOSIS.				Tons	Cwts.	Qrs.	Lbs.
Carcase Meat	...	...	...	19	3	2	26
Offals	76	4	2	20

TUBERCULOSIS ONLY.

Carcase Meat	59	11	1	1
Offals	39	6	0	3

TOTAL	194	5	2	22
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ANALYSIS OF CONDEMNATIONS DURING 1949.
Showing Diseases or Conditions and Affected Carcase Parts thereof.
CATTLE. Number Slaughtered and Examined, 5,349.

Diseases	Carcase and all organs	Part Carcases	Heads	Mes.	Stom.	Spleen	Liver	Part Liver	Skirts	Lungs	Hearts	Kidneys	Udders
Abcesses ...	1	1	3	11	25	8	196	4	20	18	3	9	—
Actino ...	—	—	47	—	—	—	—	—	—	5	—	—	—
Angioma ...	—	—	—	—	—	—	58	—	—	—	—	—	—
Bacterial Necrosis	—	—	—	—	—	—	15	2	—	—	—	—	—
Bruising ...	—	24	—	—	—	—	—	—	—	—	—	—	—
Cirrhosis ...	—	—	—	—	—	—	1007	—	—	—	—	—	—
Congestion	—	—	—	—	—	—	—	—	—	19	—	—	—
Contamination (by Stom. Contents)	—	—	—	—	—	—	—	—	—	48	—	—	—
Cysts ...	—	—	—	—	—	7	66	—	—	153	3	4	—
Cysticercus Bovis ...	—	—	22	—	—	—	—	—	3	—	28	—	—
Distomatosis	—	—	—	—	—	—	—	742	—	177	—	—	—
Emphysema	—	—	—	—	—	—	—	—	—	5	—	—	—
Engorged ...	—	—	—	—	—	—	—	—	—	2	—	—	—
Fatty conditions	—	—	—	—	—	—	3	—	—	—	—	—	—
Hæmorrhage	—	—	—	—	—	1	—	—	—	—	—	—	—

Injury ...	—	9	—	—	—	2	—	2	—	—	—	—	—	—	—	—	—
Johnes ...	—	—	—	496	—	—	—	—	—	—	—	—	—	—	—	—	—
Johnes with emac.	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Melanosis ...	—	—	—	—	—	1	1	—	—	—	—	—	—	—	—	—	—
Myocarditis	—	—	—	—	—	—	—	—	—	—	—	—	—	5	—	—	—
Nephritis ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	28	—	—
Oedema ...	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Pericarditis	—	—	—	—	—	—	—	—	—	—	—	—	—	74	—	—	—
Peritonitis ...	—	—	—	62	128	231	—	11	67	—	—	—	—	—	—	—	—
Pleurisy ...	—	—	—	—	—	—	—	—	77	447	—	—	—	—	—	—	—
Pneumonia	—	—	—	—	—	—	—	—	1	27	—	—	—	—	—	—	—
Pyæmia ...	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Tuberculosis ...	—	55	329	169	107	76	119	—	134	570	154	8	—	—	—	—	—
Tuberculosis (Generalised)	14	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Tumours — Malignant & Benign ...	—	—	—	—	—	5	2	—	7	4	1	—	—	—	—	—	—
TOTALS ...	19	90	401	738	260	331	1467	759	311	1475	268	49	—	—	—	—	—

COWS—No. Slaughtered and Examined, 3,331.

Diseases	Carcase and all organs	Part Carcases	Heads	Mes.	Stom.	Spleen	Liver	Part Liver	Skirts	Lungs	Hearts	Kidneys	Udders
Abcesses ...	—	11	5	15	52	118	249	2	20	26	4	11	5
Abnormal Odour ...	1	—	—	—	—	—	—	—	—	—	—	—	—
Actino ...	—	—	42	—	—	—	—	—	—	2	—	—	—
Angioma ...	—	—	—	—	—	—	365	—	—	—	—	—	—
Bacterial Necrosis	—	—	—	—	—	—	14	—	—	—	—	—	—
Bruising ...	—	59	—	—	—	—	—	—	—	—	—	—	—
Cirrhosis ...	—	—	—	—	—	—	1060	—	—	—	—	—	—
Congestion	—	—	—	—	—	1	1	—	—	32	—	—	—
Contamination	—	—	—	2	3	3	1	1	2	10	—	—	—
Cysts ...	—	—	—	—	—	12	99	—	3	139	1	8	—
Cysticercus Bovis	—	—	11	—	—	—	—	—	—	—	6	—	—
Distomatosis	—	—	—	—	—	—	—	518	—	158	—	—	—
Dropsy ...	3	—	—	—	—	—	—	—	—	—	—	—	—
Emphysema	—	—	—	—	—	—	—	—	—	15	—	—	—
Engorged ...	—	—	—	—	1	1	—	—	—	1	—	—	—
Fatty Conditions	—	—	—	—	—	—	14	—	—	—	—	—	—
Fever ...	1	—	—	—	—	—	—	—	—	—	—	—	—
Injury ...	—	4	—	—	—	3	—	—	6	—	—	2	—
Improper Setting	1	—	—	—	—	—	—	—	—	—	—	—	—
Johnes' ...	—	—	—	1116	—	—	—	—	—	—	—	—	—

PIGS—No. Slaughtered and Examined, 561.

[illegible]

CALVES—NUMBER SLAUGHTERED AND EXAMINED, 7,930

Diseases				Carcases and all organs	Part Carcases	Vells	Races	Livers
Abcesses	...	...	...	—	—	1	1	2
Bruising	...	...	...	—	5	—	—	—
Congestion	...	...	...	—	—	—	9	2
Decomposition	...	...	...	2	—	—	1	—
Dropsy	...	...	...	1	—	—	—	—
Fatty Conditions	...	...	...	—	—	—	—	4
Fever	...	...	...	44	—	—	—	—
Immaturity	...	...	...	65	—	—	—	—
Injury	...	...	...	—	—	1	—	—
Jaundice	...	...	...	13	—	—	—	—
Joint Ill	...	...	...	21	—	—	—	—
Melanosis	...	...	...	—	1	—	6	—
Metabolic Pigmentation	...	...	...	—	—	—	—	18
Moribund	...	...	...	2	—	—	—	—
Navel Ill	...	...	...	1	—	—	—	—
Pneumonia	...	...	...	—	—	—	2	—
Peritonitis	...	...	...	—	—	2	2	—
Pyæmia	...	...	...	5	—	—	—	—
Septic Intoxication	...	...	...	1	—	—	—	—
Tuberculosis (Congenital)	...	...	...	24	—	—	—	—
TOTALS	...	...	...	180	6	4	21	26

SHEEP—NUMBER SLAUGHTERED AND EXAMINED, 34,816

Diseases	Carcase and all organs	Part Carcase	Heads	Mes.	Stom.	Plucks	Lungs	Heart	Liver
Abcesses	—	12	2	—	—	27	7	—	40
Anæmia	2	—	—	—	—	—	—	—	—
Cirrhosis	—	—	—	—	—	—	—	—	1410
Contamination	—	—	3	1	—	9	—	—	—
Congestion	—	—	—	—	—	1	10	—	2
Cysts	—	—	2	—	—	9	212	1	502
Decomposed	3	—	—	—	—	—	—	—	—
Distomatosis	—	—	—	—	—	—	—	—	175
Dropsy	31	—	—	—	—	—	—	—	—
Emaciation	8	—	—	—	—	—	—	—	—
Engorged	—	—	—	—	—	—	1	—	1
Fever	5	—	—	—	—	—	—	—	—
Imp. Bleeding	2	—	—	—	—	—	—	—	—
Leukæmia	1	—	—	—	—	—	—	—	—
Moribund	4	—	—	—	—	—	—	—	—
Oedema	—	3	—	—	—	—	—	—	—
Pericarditis	—	—	—	—	—	—	—	3	—
Pleurisy	—	1	—	—	—	—	17	—	5
Pneumonia	2	—	—	—	—	3	127	—	—
Strongyli	—	—	—	—	—	—	246	—	48
Toxæmia	1	—	—	—	—	—	—	—	—
TOTALS	59	16	7	1	—	49	620	4	2183

(b) UNWHOLESOME FOOD CONDEMNED

The following Table gives details of the nature and weight of foodstuffs found to be unfit for human consumption during the year 1949, the bulk of the foodstuffs being surrendered to the Sanitary Inspectors at the time of inspection.

					Tons	Cwts.	Qrs.	Lbs.
Meat and Offal (at Government controlled slaughterhouse) ...	...	...	...	...	194	5	2	22
Tinned and other packed foods ...	...	...	...	...	3	19	1	2½
Rabbits ...	...	...	...	...	—	—	1	22
Fish ...	...	...	...	...	—	1	1	0
Bacon ...	...	...	...	...	—	—	—	18
Butter ...	...	...	...	...	—	—	—	20
Cheese ...	...	...	...	...	—	—	—	23¼
Sweets ...	...	...	...	...	—	—	1	11
Synthetic Cream ...	...	...	...	...	—	6	1	4
Figs ...	...	...	...	...	—	—	1	8
TOTAL ...	...	...	...	...	198	14	0	18

Every effort was made to salvage for purposes other than human consumption the food condemned as unfit, subject to satisfactory safeguards as to the method of disposal.

Certain cases where foodstuffs not in a fit condition for retail sale, and which were in such quantity as to be useful for salvaging for other purposes, were referred to the Ministry of Food Salvage Division.

(c) MILK**Changes in Administration**

The changes in administration with regard to milk and dairies, as foreshadowed in the Food and Drugs (Milk and Dairies) Act, 1944, were brought into force during the year. The whole question of administration has been revised and brought up to date in the light of experience, and development in modern dairy practice.

In October, the responsibility for the supervision of milk production was transferred from the local authorities to the Ministry of Agriculture and Fisheries. It will be remembered that this measure had considerable opposition when the Act was in the Bill stage and there are misgivings still at the transfer to the Ministry of Agriculture and Fisheries, of duties which are principally a Public Health concern. Further, it is generally admitted, that, at the present time, there is an acute shortage of officers trained in this type of work and it is felt, that, for the time being at any rate the duty could quite well have been left with Local Authorities. So far as Walsall is concerned however, the general responsibilities of the Authority are affected very little, as the number of farms in the Borough is very small.

Milk Production

During the year 2 Accredited licences were issued and on the 30th September, 1949, the position with regard to dairy farms and milk production was as follows:—

Number of Accredited Milk Producers	...	...	...	7
Number of non-designated Milk Producers	...	...	...	15

Biological Tests

Reference to tubercle positive milk samples occurs in the Report year by year. The results for 1949, showing one positive sample out of a total of 59 taken are, happily, much better than those for last year, which showed 6 positive samples from a total of 42. In accordance with the normal practice, the case was reported to the Animal Health Division of the Ministry of Agriculture and Fisheries. Subsequent investigation of the herd revealed no evidence of tuberculosis.

Tuberculosis

The danger, especially to children, of the spread of Bovine Tuberculosis through infected milk, is well-known and measures to be adopted to eliminate this danger, were the subject of enquiry during the year by the Association of Municipal Corporations. The complete answer of course is, tuberculosis-free dairy herds, but until this is achieved, it will be necessary to avail ourselves of all measures provided to ensure as safe a milk supply as possible. It is interesting to note that the legislation introduced this year, provides the necessary power for requiring the compulsory heat treatment of milk, when positive samples are obtained, and that other legislation has the ultimate object of securing the heat treatment of all milk throughout the country, with the exception of Tuberculin Tested milk.

Sampling—Milk (Special Designation) Regulations

Results of samples submitted for examination under the Milk (Special Designation) Regulations were good, and are shown in Table, page 75. The unsatisfactory Pasteurised milk samples which failed the Phosphatase Test, were due to difficulties arising with old worn out plant and resulted in the firm concerned being interviewed and admonished by the Health Committee.

Dairy Premises

As mentioned in my reports for 1947 and 1948, two dairy firms in the town were endeavouring to construct new premises. It is pleasing to record that at the end of the year, modern dairies for the firms concerned were under construction and they should be completed in the next few months.

There is no doubt that the Health Committee's policy in recommending the construction of new premises in these cases, rather than assuming the make-do policy of adaptation and improvement within the limits of the existing establishments, has been fully justified and will have the effect of making the dairy position in Walsall almost completely satisfactory.

Heat Treatment Facilities

There are three pasteurising and four sterilising plants at the present time and when the two new dairies are finished, heat treatment plant capacity will be sufficient to fully meet the demands for designated milk, in the event of Walsall being included in a "designated area" under the Milk (Special Designations) Act, 1949. It is well known that the Midlands are considerably advanced in this sphere of public health work, compared with other parts of the country and it is possible that the Act may be inaugurated in an area of which Walsall will be a part.

Licensing

The degree of centralization of the milk trade in Walsall (which is necessary for efficient administration in the event of compulsory heat treatment of non-designated milk) is reflected in the licences issued this year under the Milk (Special Designations) (Pasteurised and Sterilised Milk) Regulations, 1949, and the Milk (Special Designations) (Raw Milk) Regulations, 1949, as follows:—

PLANT LICENCES.

For Milk Pasteurisation ...	...	...	...	3
For Milk Sterilisation ...	...	...	...	4

DEALERS LICENCES.

For the sale of Pasteurised milk	...	...	28
For the sale of Sterilised milk	...	...	284
For the sale of Tuberculin tested milk	...	...	3

TABLE I.
RESULTS OF BACTERIOLOGICAL EXAMINATION OF MILK, 1949

GRADE OF MILK	SUMMARY OF RESULTS			DETAILS OF TESTS											
	Satis- factory	Unsatis- factory	Total	Methylene blue		Coliform		Phosphatase		Turbidity		Phenol Phthalein		Tubercle Bacilli	
				Satis- factory	Unsatis- factory	Satis- factory	Unsatis- factory	Satis- factory	Unsatis- factory	Nega- tive	Posi- tive	Nega- tive	Posi- tive	Nega- tive	Posi- tive
T.T. (Certified)	3	3	6	5	1	2	3	—	—	—	—	—	—	—	—
T.T. ...	9	1	10	10	—	3	1	—	—	—	—	—	—	—	—
Accredited ...	60	21	81	70	11	62	16	—	—	—	—	—	—	15	1
T.T. (Pasteurised)	44	2	46	46	—	—	—	43	2	—	—	38	1	—	—
Pasteurised ...	82	7	89	84	5	—	—	84	2	—	—	73	1	—	—
Heat Treated ...	26	3	29	27	2	—	—	28	1	—	—	20	—	—	—
Sterilised ...	108	—	108	79	—	—	—	—	—	85	—	—	—	—	—
Ungraded ...	32	16	48	40	8	37	11	—	—	—	—	—	—	43	—
TOTALS	364	53	417	361	27	104	31	155	5	85	—	131	2	58	1

(d) ICE CREAM**Trade Developments**

With the marked improvement in the food position and the availability of certain commodities, the ice cream trade extended considerably during the year, although the number of manufacturers is the same, namely:—

Heat Treated ...	...	...	...	9
Cold Mix ...	...	...	...	8

There are 170 premises registered for the sale of ice cream.

The volume of ice cream manufactured and sold to the public, was greater in 1949 than in previous post-war years. Despite the increase in trade however it is true to say, that, so far as Walsall is concerned, the ice cream trade has reached the stage when healthy competition has begun to show a marked effect. Firms have developed a spirit of emulation and are anxious to bring their premises and products up to as high a standard as possible. Two manufacturers are extending their premises and a third has applied for a building licence to construct a new ice cream factory. Mechanization in the trade was increased and many other improvements to premises were brought about during the year. Whilst the supply of machinery has much improved, traders are concerned at the dearth of wrapping machines, the introduction of which would eliminate the greater part of the need for handling.

Improved Standards

In addition to a desire to meet the requirements of the Department, traders find that it is becoming commercially necessary to produce a good ice cream, both from a food value point of view and bacteriologically, as it is often the case that adverse reports from the Department, are followed by the cancellation of contracts.

The aspect in which improvement is perhaps most patent, is with regard to the food value or chemical standard. Last year, the results of 30 samples of ice cream submitted for chemical analysis, showed an average fat content of 4.01 per cent. This year 76 samples were submitted, an average of the results showing 7.9 per cent.

Statutory Standard

Although the Minister of Food decided during the year that the time was not opportune for the fixing of a chemical standard for ice cream; the time is fast approaching when this can be done, and should be done, indeed there is reason to believe that a standard would be no less welcomed by many members of the trade, if only to make common ground for fair competition.

Supervision of Manufacture

The importance of safe ice cream is more fully realised, when it is known that a day's production from a modern factory may be sufficient to supply tens of thousands of people. It is vital that close supervision be maintained over the manufacture of ice cream and to see that the regulations relating thereto are not only fully appreciated and understood, but are also carried out.

Whilst the modern tendency towards mechanisation and large scale production is simplifying the supervision of the trade as a whole, a considerable demand is made on officers' time, since ice cream production is no longer considered to be exclusively a summer trade. Consequently, the inspection of premises, the supervision of processing and the education of employees of the trade, requires attention throughout the year.

Ice Cream Samples

Sampling was intensified during the period under review, a total of 129 samples being submitted for bacteriological examination, compared with 78 in 1948. The results shown in Table II, page 78 are approximately of the same standard as last year and similar results were obtained from manufacturers both from inside the town and elsewhere.

Considerable time was spent on the investigation of unsatisfactory samples and the conclusion drawn from the investigations, emphasised the need for the training of personnel in efficient sterilisation and the development of the techniques used in the milk dairying industry. However, the efforts and the outlook of the trade towards hygiene is encouraging and should show improved results in the coming year.

Vehicles

Attention to the construction of ice cream vehicles is a regular feature of the Department's work. The manufacturers as a whole, are anxious to have vehicles with as modern and pleasing an appearance as possible and they comply with improvements suggested with praise-worthy co-operation. There has been some delay in one or two cases, however, in this respect, but it is hoped that all vehicles belonging to Walsall manufacturers and retailers, will possess suitable washing facilities, with the provision of both hot and cold water, before the start of the summer season.

The whole question of retail sale from vans and carts is marked for special attention in 1950 and vehicles coming into the town from outside for the purpose of selling ice cream, will also be required to comply with the Walsall standard.

Registration

Compulsory registration for ice cream vehicles and indeed for all vehicles from which food is sold by retail, would be of particular help in dealing with this problem. Some Authorities have already sought this provision in private Bills and are now in a position to require approval of all such vehicles, before they are put into use.

TABLE II.
RESULTS OF ICE CREAM SAMPLES

Local Manufacture							
Grading	1		2		3		4
Heat Treatment ...	35	...	13	...	8	...	20
Cold Mix ...	10	...	4	...	1	...	4
	—		—		—		—
Totals ...	45	...	17	...	9	...	24
	—		—		—		—

Manufactured outside Walsall and sold locally

Grading	1		2		3		4
Heat Treatment ...	17	...	6	...	6	...	5
Cold Mix ...	—	...	—	...	—	...	—
	—		—		—		—
Totals ...	17	...	6	...	6	...	5
	—		—		—		—

Note on the Test applied

The provisional test for ice cream which has been operating experimentally for the last three years is the methylene blue reduction test. The provisional gradings are as follows:—

Provisional Grading	Time taken to reduce methylene blue
1 ...	4½ hours or more.
2 ...	2½—4 hours.
3 ...	½—2 hours.
4 ...	0 hours (i.e., reduction at the end of incubation period).

Grades 1 and 2 are considered satisfactory, and grades 3 and 4 unsatisfactory.

The standard suggested for manufacturers is that over a period of six months 50 per cent. of the samples should fall in grade 1, 80 per cent. in grades 1 or 2, not more than 20 per cent. in grade 3 and none in grade 4.

It has been emphasised to health authorities that judgement should not be made on individual samples, but rather that results over a period of six months should be examined before assessing the hygienic quality of a particular product. The need for reserved judgement is also stressed, in view of the experimental nature of the methylene blue test. Further, it would not be justice to the trade to apply too rigidly a test, which so far as its relation to ice cream is concerned has yet to be proved.

(e) FOOD HYGIENE

During the last two or three years, very few subjects have stirred public opinion so much, as the need for better conditions in the handling, storage and preparation of food. The acute awareness generally shown towards this problem, has been brought about by a nation-wide campaign for a cleaner and safer food and to which most health authorities have made a practical contribution.

The method of approach towards food hygiene has varied somewhat with different authorities. The Food Trade Guild Scheme has had its supporters, Codes of Practice have been formulated and lectures introduced. In Walsall it was felt that whatever the scheme adopted, the foundation for improved hygienic conditions in the food trades could only be achieved, by education, detailed inspection of food premises, and the full application of the Food and Drugs Act, 1938 and other relevant legislation.

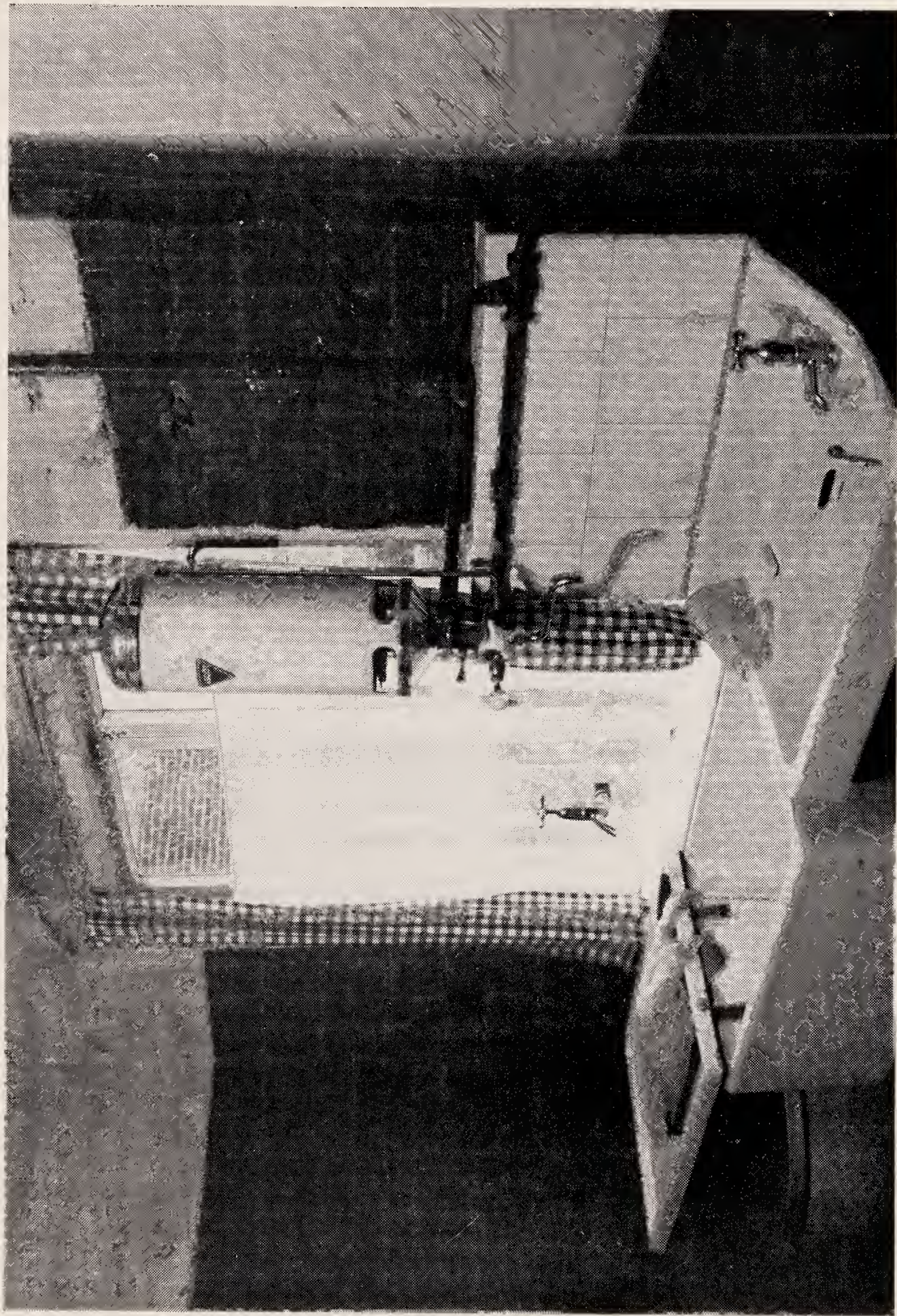
Education

With regard to education, the lectures mentioned in my last report were launched in February. Some fourteen lectures were given to the food trades, and well over five hundred attendances were recorded. The success of the lectures was due in no small measure to the active co-operation of the trade organisations, the traders themselves, who showed a keen interest throughout, and to the Director of the Public Health Laboratory Service, at Colindale, who gave advice and provided admirable material on food-borne infections and food hygiene generally. Considerable help was also given by the Central Council for Health Education.

The lectures were not confined to the Food trades alone. Various organisations in the town were addressed on the subject and a start was made on what is hoped will be a feature of the Department's Educational Programme, that is, talks to senior classes in the Secondary Schools.



FISH FRYER'S PREMISES.
(a) *Unsatisfactory preparation room—lack of proper amenities.*



(b) Preparation room suitably reconstructed—washbasin, hot and cold water, soap and towel, sink and impervious draining board.

Encouraged by the results of the lecture series, and with the co-operation of the Director of Education, a course of instruction embracing various aspects of food hygiene, was arranged at one of the Evening Institutes in connection with Further Education. It was an experiment. The response in this case however, was very disappointing and left an impression that the food handler's attitude towards hygiene was more of a topical than realistic character. But good purpose was served, if only to emphasise the progress yet to be made in our efforts for improvement in this aspect of our work.

Model Byelaws

In October, new Model Byelaws were approved by the Minister of Food in connection with the handling, wrapping and delivery of food, and the sale of food in the open air. It was pointed out when the Model Byelaws were issued, that the Minister was anxious to see a rapid improvement in hygienic conditions in the Food Trades; there is no doubt that this desire is shared by all Health Authorities, the general public and the majority of food traders alike.

Although there has been little opportunity up to the present of weighing the full implication of the Byelaws, it is clear that any improvement which may be gained will depend very largely upon their application. Today, food hygiene is seen in a new perspective, problems have been brought into focus, which, although realised by health authorities for many years, were partly obscured by the fact that positive action was not possible, because of deficient legislation, and a general reluctance to depart from established practice. With certain aspects of trading it will not be possible to bring about the desired improvement in existing circumstances and a break from tradition will have to be seriously considered.

The adoption of Byelaws will fill a great need and should receive the full support of all concerned with public health, not only in regard to their adoption, but also in achieving the standard of premises, and amenities, so necessary in the observance of hygienic practice.

Inspection of food premises

Systematic inspection of premises is proceeding and at the end of the year the inspection of ice cream, fish fryers', butchers', and meat manufacturing establishments, had been completed. As shown in Table III, page 83, considerable progress was made in securing improvement in food premises generally.

New Food Establishments

Another interesting feature of the year's work, was the liaison between the Health Department and the Food Executive Officer, in connection with applications for licences to open food shops, snack

bars, fish fryers establishments, meals services, sweet shops, etc. Some forty cases were reported upon and in thirty-eight instances, work of one kind or another was necessary, before the premises could be considered satisfactory. This experience underlines more than ever the need for the registration of all food premises.

Legal Proceedings

The result of the legal proceedings mentioned in the Report for 1949 will be found in Part 8, page 99. Also included are details of the result of proceedings in respect of a further case of unsatisfactory food premises, and food contamination.

TABLE III.

Details of Improvements to Food Premises

	Butchers	Ice Cream	Fish Fryers	Others	Total
No. of premises improved	39	40	31	26	136
Structural repairs	12	7	16	15	50
Ventilation provided or improved	5	6	6	8	25
Suitable food storage facilities provided	1	2	2	6	11
Hot water supplies installed	25	29	15	11	80
Wash basins provided ...	4	11	9	9	33
Sinks provided	14	6	16	13	49
Miscellaneous improvements	24	20	20	23	87
Total improvements ...	124	121	115	111	471

(f) SAMPLING—FOOD AND DRUGS ACT, 1938.

Mr. F. E. Thompson, A.R.C.S., F.R.I.C., continued to hold the appointment of Public Analyst, and samples under the Food and Drugs Act, 1938, have been submitted to him for analysis.

Of the 254 samples submitted under the Food and Drugs Act, 48 were formal and 206 informal; of these, 2 (equivalent to .78 per cent.) were adulterated.

87 of the samples were milk, of which 2 (equivalent to 2.29 per cent.) were adulterated.

Detailed list of samples. Milks 87, Ice Cream 76, Fish Paste 6, Tomato Ketchup 3, Sauce 3, Sago 5, Tapioca 4, Gelatine 2, Dessert Gelatine 2, Custard Powder 2, Butter 5, Margarine 5, Cooking Fat 5, Pickled Onions 3, Mixed Spice 3, Pastry Mixture 2, Sandwich Spread 2, Custard Mix 2, Gravy Powder 2, Shredded Beef Suet 2, and 1 each of the following: Vanilla Flavouring, Tomato Catsup, Ham and Veal Paste, Self-raising Flour, Gelatine Powder, Olive Oil, Gravy Browning, Tomato Chutney, Savoury Spread, Beef Suet, Malt Vinegar, Castor Oil, Condensed Full Cream Milk, Ground Nutmeg, Mustard, Cut Mixed Peel, Ground Ginger, Steak and Kidney Pudding, Pate de Foie, Golden Raising Powder, "Bev," Glace Cherries, Milk Pudding, Fruit Pectin, Steamed Pudding Mixture, Golden Syrup, Cremola, Cake Flour Mixture, Coffee and Chicory Cubes, Salad Cream, Jam Tart, Stewed Fruit.

Details of Adulterated Samples :

Sample No. 58, Milk ... Deficient in fat 1.66 per cent.

Sample No. 59, Milk ... Deficient in fat 1.33 per cent.

Subsequent investigation into the circumstances of these two unsatisfactory samples showed that the low fat content was due to the milk not being properly mixed before sale. The vendor concerned was warned, and subsequent samples obtained from the same source were satisfactory.

PART 4.—WATER

The water supply for the area is from the mains of the South Staffordshire Waterworks Co. and was satisfactory during the year both in quantity and quality.

In only a few houses is mains water not available. Most of these cases are in outlying districts and many of the properties are likely to be the subject of housing action.

The following is an approximate proportion of the dwelling houses supplied:—

	Houses	Population	Percentage
(a) Direct to houses ...	29,350	111,000	96.5
(b) Houses sharing stand-pipes or common taps	1,050	4,000	3.5

A high percentage of the houses sharing standpipes or common taps are either already condemned or likely to be condemned within the next ten years.

One unsatisfactory sample of water was obtained during the year from a shallow well. Advice was given on the precautions to be taken.

PART 5.—ATMOSPHERIC POLLUTION

Scope and Policy

The past year has seen a steady extension of the Department's efforts to secure a progressive reduction of the impurities in the town's air. As was foreshadowed in the 1948 Annual Report, increased attention has been focussed on certain installations which, for considerable periods, had been causing serious smoke nuisance. In a number of cases an appreciable measure of success has been achieved. It is pleasing to note that certain industrial chimneys no longer enjoy the invidious distinction of being land marks by reason of their emissions of smoke and soot. It has to be admitted, however, that there still many more problems to be solved before any great improvement in the purity of Walsall's air will be noticed!

Smoke abatement work is necessarily restricted by the fact that often a great deal of time has to be spent on one particular problem and by the limited staff available for the work.

Improvements Effected

It is not possible, for various reasons, to give precise descriptions of factories or processes where reductions in smoke or dust emissions have been achieved.

Mention must be made, however, of the installation by the Baths Department of mechanical stoking to its boilers. This innovation has drastically cut down the amount of smoke discharged from the Baths chimney stack, and has effected a considerable saving in fuel. It is also pleasing to note that a number of private firms, who had been operating hand-fired vertical boilers and often causing serious smoke nuisance, have now equipped their boilers with underfeed mechanical stokers, with beneficial results to the community and themselves.

The Department has continued to co-operate with the Fuel Efficiency Branch of the Ministry of Fuel and Power in cases of special difficulty. In one particular case, a boiler installation which had caused serious smoke nuisance for many years, is now operating successfully without giving rise to nuisance. This improvement was achieved only as a result of prolonged investigations and demonstrations carried out jointly by the Smoke Inspector and Ministry of Fuel Engineer.

Metallurgical processes have continued to cause anxiety during the year because of their proneness, particularly in old and small plants, to give rise to black smoke emissions. One firm has successfully converted its coal-fired annealing ovens to mechanical stoker operation, with substantial reduction in smoke emissions, (and, it is pleasing to note, in fuel costs). The example of this progressive company will, it is hoped, be followed by others.

The firms referred to are to be congratulated on their enlightened approach to the smoke problem.

Measurement of Pollution

The Department has continued to operate gauges for assessing the deposited atmospheric impurity and for estimating the activity of sulphur gases in the air. These instruments are described respectively as Deposit Gauges and Lead Peroxide Gauges. As in 1948, five Deposit Gauges have been in use, while the number of Lead Peroxide Instruments was increased from seven to nine as from 1st March, 1949. This latter increase was made in order to obtain more information about the distribution of sulphur pollution.

The results of the examinations of the contents of the various instruments are set out fully in Tables IV and V on pages 89 and 90; they are also depicted in graph form on pages 91 and 92.

The five Deposit Gauges have now been in continuous use on their present sites for four years. The average readings for the whole of the town in respect of these four years are set out below:—

Deposit in Tons per Square Mile per Month

1946	1947	1948	1949
18.32	17.09	16.65	15.82

Although there has been a steady decline in the average amount of deposited impurity, it should be realised that a deposit of 15.82 tons per square mile per month represents an annual total of 2,600 tons in a town the size of Walsall. If these 2,600 tons of solid impurities were deposited in a conical heap on The Bridge, the cone would be 15 feet high and 170 feet in diameter, in other words, it would occupy almost the whole of the open space of The Bridge.

A study of Table IV shows that once again the CENTRAL (Hatherton Road) area of the town had the unenviable distinction of having received the greatest amount of deposited impurity, whilst the EAST (Sutton Road) area had the least. The different areas of the town arranged in descending order of "sootiness" for 1949 are as follows:—CENTRAL (Hatherton Road); NORTH (Transport Depot); SOUTH (Bescot Sewage Works); BLOXWICH (Station Street); EAST (Sutton Road). This sequence is similar to that which appertained in the three previous years, except that the relative positions of NORTH and SOUTH have been reversed.

Weather conditions, and in particular rainfall, markedly affect the amount of material received by Deposit Gauges. For instance, the average deposit for July was 21 tons per square mile, as compared with 7.4 tons for June (See graph on page 91). The average rainfall for July was 82 millimetres or 3.3 inches and for June ten millimetres or 0.4 inches.

As will be seen from Table V, the sulphur readings generally differ only slightly from those of 1948, except that sharper increases were recorded at Bloxwich Road and Manor Hospital. It will be necessary to have several years' results before expressing an opinion

as to whether this form of pollution is increasing or declining. The graph on page 92 shows that sulphur dioxide emissions follow a definite seasonal cycle; the increases recorded in the early and late months of the year are almost certainly due to the greater use of domestic fires at those seasons.

Prior Approval

The Borough Surveyor's staff have continued to co-operate by forwarding for scrutiny by Sanitary Inspectors all plans of new and extended factory buildings. This is a most important aspect of smoke abatement work, as it often enables processes which are liable to cause nuisance to be subjected to effective safeguards at the outset.

During 1949, 113 plans were examined by Sanitary Inspectors. Of this number, 24 involved processes likely to cause nuisance from smoke, dust or noise. Where appropriate, advice was given as to the precautions to be adopted to prevent or reduce nuisance.

Future Considerations

Although the Report relates mainly to activities throughout the past year, it is perhaps worth while making some observations with regard to the future.

The most important single factor in smoke abatement work is the attitude of the individual man and woman. This generalisation applies equally to managers, workpeople and house-holders. There is a need for change of outlook on the part of all three.

Industrial managements ought by now to accept the principle that stoking is a skilled trade, that stokers should be treated accordingly, and that they should be required to give a high standard of service.

Stokers and firemen, on the other hand, should be prepared to avail themselves of opportunities that now exist to secure sound practical and theoretical training in their work. In other words they should be prepared to train and qualify as skilled tradesmen.

In August last year the Department sent out letters to some 60 firms inviting their engineers and firemen to attend training courses, in Walsall, arranged by the Ministry of Fuel and Power. Probably 150 men were affected by these letters. It is an indictment of stokers and management that only one man in Walsall was prepared to take these courses.

House-holders and property owners should realise that about one half of the smoke and dust of their town comes from their own domestic chimneys. While gas and electricity are excellent forms of smokeless heating, it will be a long time before sufficient of these forms of energy become available for the universal heating of houses.

There are now available, however, many excellent grates and ranges designed to burn coke (which is in plentiful supply) and other forms of solid smokeless fuel. Property owners and occupiers who contemplate replacing defective or obsolete grates would render a service to the community and to themselves by installing these new and almost smokeless heating appliances.

Whatever may be achieved in future by departmental action and by more stringent anti-smoke laws (and the latter are long overdue), there is no doubt that the adoption of the foregoing suggestions would produce a surprising improvement in a comparatively short time.

ATMOSPHERIC POLLUTION

TABLE IV.

Deposit Gauges—Records of Deposits

Month	Deposits in Tons per Square Mile per Month.				
	Bloxwich (Station St.)	North (Transport Depot)	Central (Hatherton Road)	East (Sutton Rd.)	South (Bescot)
January	16.04	13.38	14.48	8.25	18.85
February	13.81	16.05	18.09	6.44	17.19
March	15.72	15.27	15.51	7.15	15.04
April	16.49	20.39	28.23	11.50	18.76
May	15.70	22.40	24.47	8.34	16.56
June	7.43	5.87	8.04	3.42	12.43
July	16.86	25.95	32.21	13.71	16.28
August	10.78	15.59	18.44	6.06	11.24
September	12.67	15.30	13.87	6.17	12.48
October	22.04	26.56	23.39	10.86	22.71
November	16.75	22.24	24.72	10.46	17.96
December	17.89	22.03	23.51	7.24	21.81
TOTALS	182.18	221.03	244.96	99.60	201.31
Monthly Average 1949	15.18	18.42	20.41	8.30	16.77
Monthly Average 1948	15.95	19.69	21.59	8.21	16.80
Monthly Average 1947	18.19	19.94	23.27	10.81	13.22

TABLE V.

Lead Peroxide Gauges—Record of Sulphur Pollution

Weight of Sulphur Trioxide collected—in milligrammes per 100 square centimetres per day.

Month	Blox- wich	North	Central	East	South	Bloxwich Road	Manor Hospital	D'mouth Avenue	Trees Road
Jan.	3.04	3.42	3.80	1.63	3.74	2.73	2.66		
Feb.	3.07	3.24	3.56	1.67	3.83	2.88	2.72		
Mar.	2.52	2.07	3.05	1.15	2.38	1.96	2.63	1.70	1.63
April	1.58	2.16	2.62	0.90	2.44	1.75	1.56	1.50	1.27
May	1.67	2.04	1.90	0.61	1.78	1.48	1.59	1.11	2.11
June	1.16	1.39	1.65	0.47	1.31	0.98	1.20	0.72	0.53
July	1.12	1.37	1.80	0.43	1.27	1.22	0.76	0.68	1.02
Aug.	1.09	1.77	1.40	0.46	1.55	1.14	1.09	0.70	0.65
Sept.	1.55	1.43	1.85	0.50	1.78	1.43	2.07	0.99	0.70
Oct.	2.58	3.39	3.22	1.09	3.35	2.28	2.86	1.82	1.55
Nov.	3.07	3.90	3.74	1.69	2.87	3.12	2.11	3.55	2.22
Dec.	3.21	3.73	3.68	1.65	4.04	3.04	2.80	3.82	2.40

Total	25.66	29.91	32.27	12.25	30.34	24.01	24.05	*16.59	*14.08
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Monthly Average

1949	2.14	2.49	2.69	1.02	2.53	2.00	2.00	*1.66	*1.41
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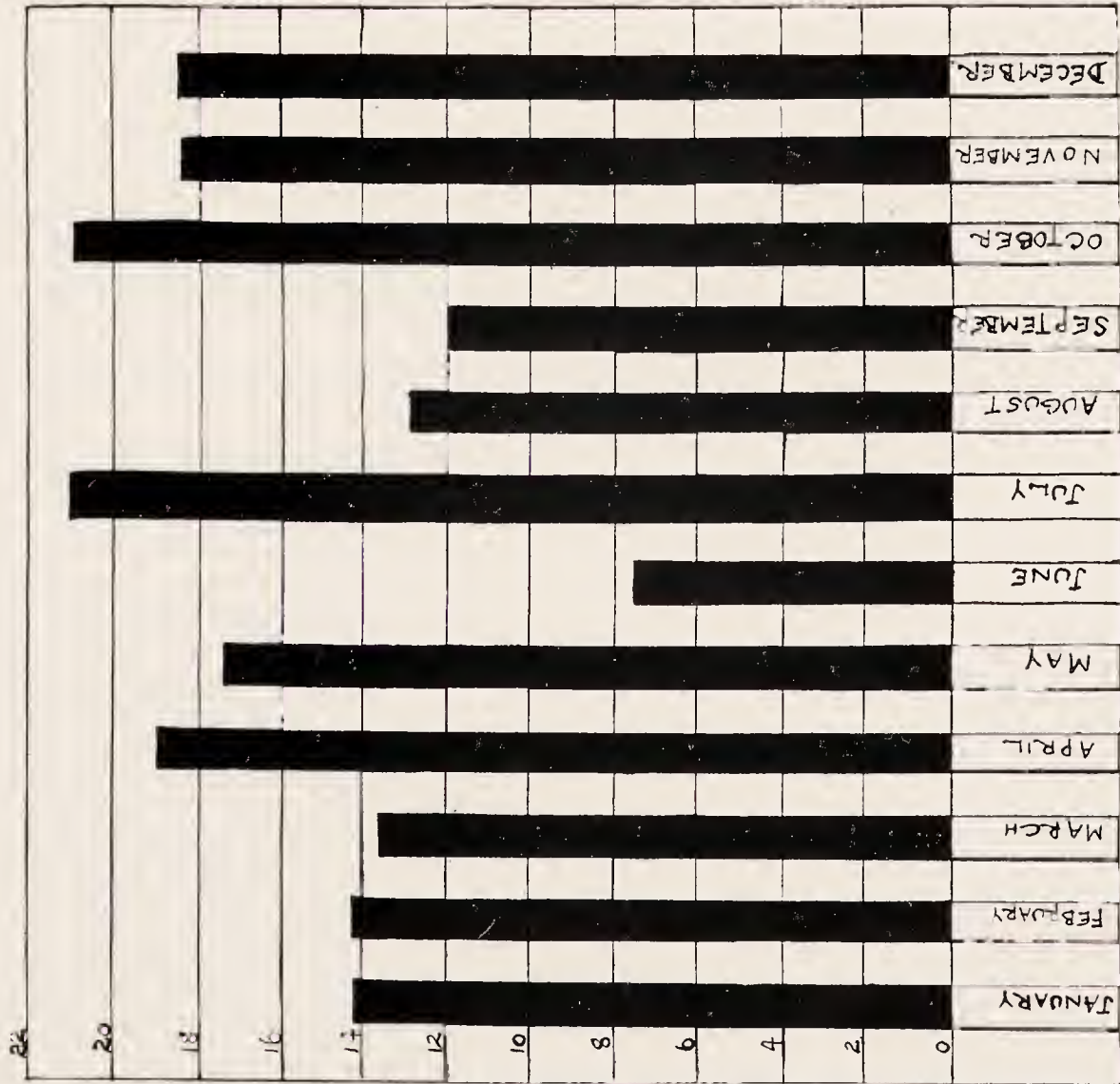
Monthly Average

1948	2.11	2.47	2.64	1.00	2.57	1.65	1.82		
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* Totals and averages for 10 months only.

DEPOSIT GAUGES 1949

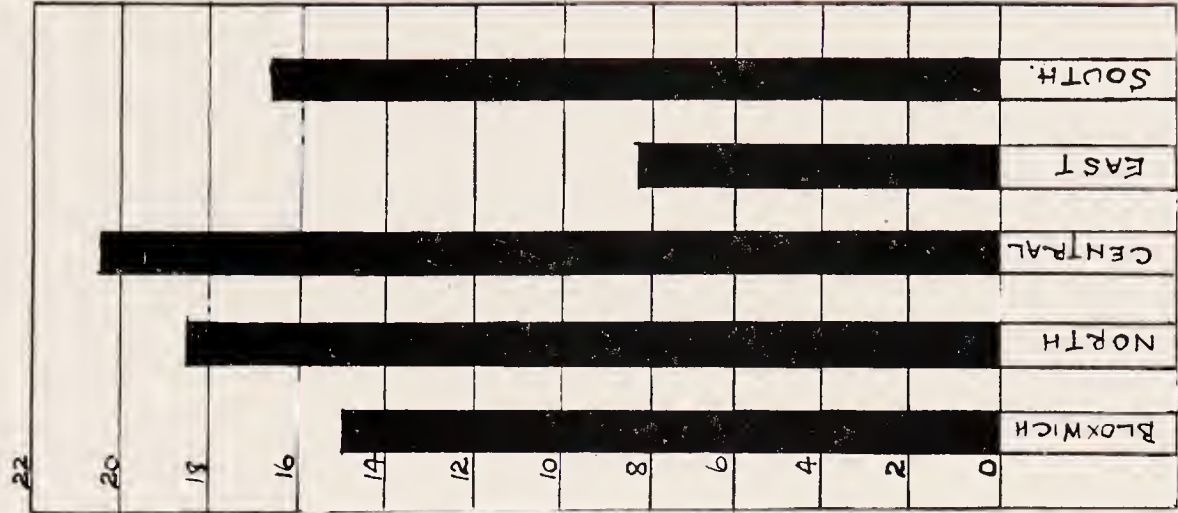
SEASONAL INCIDENCE (AVERAGES)



SEASONAL
AVERAGE
FOR WHOLE
OF TOWN
TONS/SQ.
MILE PER
MONTH

DEPOSIT GAUGES 1949

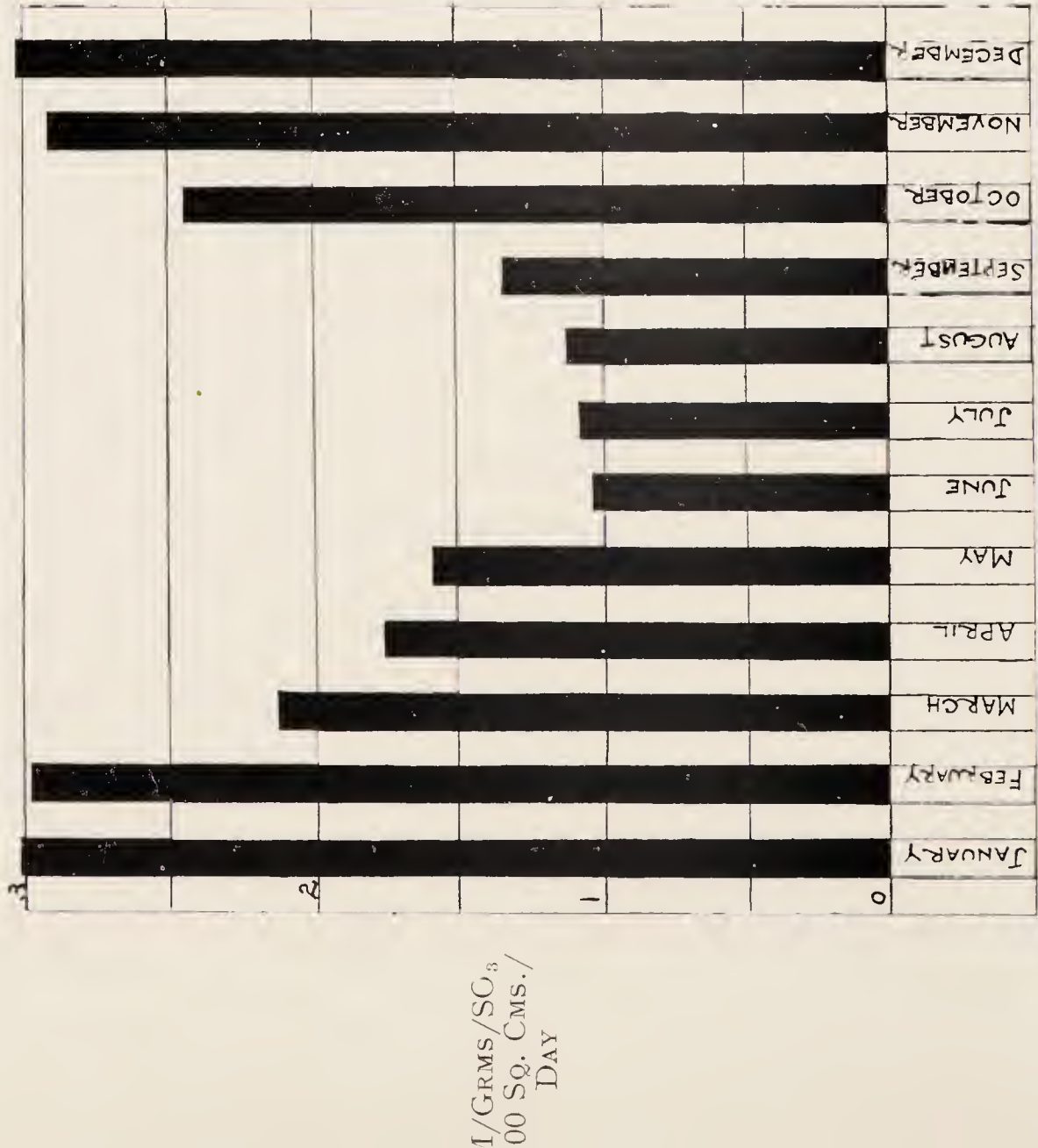
DISTRICT INCIDENCE
(AVERAGES)



TONS PER
SQ. MILE
PER MONTH

LEAD PEROXIDE GAUGES 1949 (SULPHUR DIOXIDE)

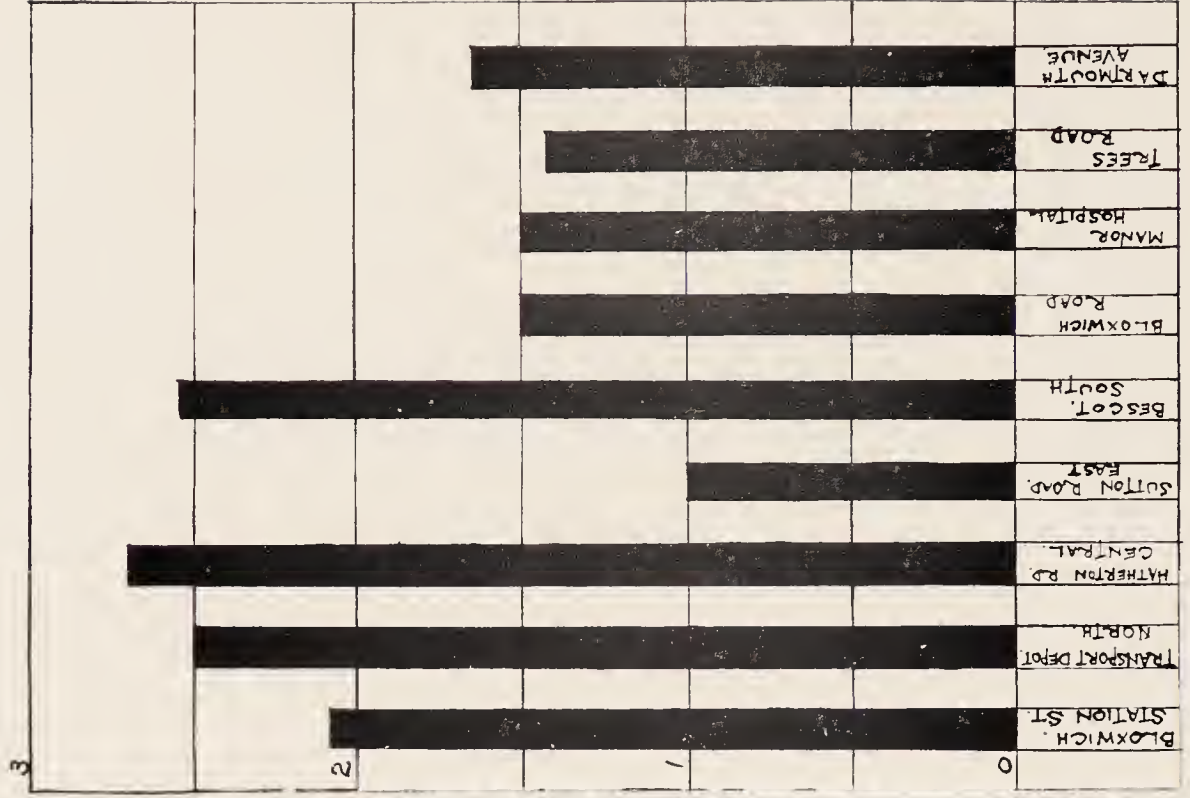
SEASONAL INCIDENCE (AVERAGES)



1/Grms/100
Sq. Cms./
Day

LEAD PEROXIDE GAUGES 1949 (SULPHUR DIOXIDE)

DISTRICT INCIDENCE (AVERAGES)



M/Grms.
SO₃/100
Sq. Cms./
Day

PART 6.—DISINFESTATION

Bloxwich Depot

The hope expressed last year that the Disinfestation Depot at Bloxwich would be reinstated during 1949, was not fulfilled. This was due to the fact, that the Home Office is concerned that buildings used for Civil Defence purposes during the War, should not be altered to such an extent that a reversion to their war-time use would be made difficult. The improvements proposed at the Depot however, are such as to affect very little the main structure and internal arrangement, and negotiations with the appropriate Government department are still proceeding.

Disinfestation and Hydrogen Cyanide Fumigation

The Department had a number of requests during the year from outside Authorities, to carry out on their behalf disinfestation work involving the use of the disinfector, and the hydrogen cyanide fumigation facilities. This work has meant a considerable help to these small authorities and has been very much appreciated. Some indication of the usefulness of the equipment is shown by the fact that some 5,400 articles were treated in the disinfector during the year, and the furniture and effects of 202 families were removed and treated with H.C.N.

Rodent Control Legislation

In July a most important enactment—The Prevention of Damage by Pests Act, 1949, received the Royal Assent. The Act, which comes into force on March 31st, 1950, re-enacts with modifications the Rats and Mice Destruction Act, 1919. The Rats and Mice Destruction Act, 1919, was never really successful, due largely to the absence of recognised methods of rodent control. This difficulty has now been overcome, and important provisions have been included in the new Act for the service of notices, not only in respect of structural repairs and general proofing work, but also as to the methods which shall be adopted for rodent destruction. In this latter respect the Minister of Agriculture has power to make regulations for controlling the methods for destroying rats and mice, etc., employed by persons carrying on business in the provision of rodent control services.

Concern has been expressed from time to time at the use for rodent control purposes of certain poisons of the 'virus' type. The Chief Medical Officer to the Ministry of Health in his Annual Report of 1932 states:

“In 1929, and again in 1931, I called attention to the danger to human beings involved in the use of 'Virus' preparations for the destruction of rodents and to the great caution necessary in employing them in circumstances in which contamination of food

and drink might occur, either with the virus material itself or by the excreta of rats and mice infected with it." . . . "It may be objected that, in comparison with the existing extensive use of virus for rodent destruction, human cases are remarkably rare. The explanation of this is probably that large doses of the specific bacilli are necessary to produce the disease in man and that the circumstances in which such doses might be ingested seldom occur. But the facts remain that the bacillary species in virus preparation are identical with those found in cases of severe and fatal gastro-enteritis in man, and that outbreaks do occur, both in this country and on the Continent, directly traceable to the use of virus."

In the reports for 1945 and 1947, further reference is made to the possibility of virus material being a source of infection in outbreaks of food poisoning. In view of the recurring incidence of these cases, it is felt that an authoritative statement on the use of this type of poison would be most welcome. Further, as methods of rodent control have for some time been under review by the Ministry of Agriculture and Fisheries, the possibility of eliminating certain poison materials for rodent control purposes might be seriously considered.

Treatment

The usual bi-annual treatments of the sewers were carried out during the year, some 700 manholes being treated on each occasion, with takes of 233 and 149 respectively. Treatments for rats and mice numbered 360, of which 68 were in connection with business premises, the cost of this latter work plus the usual establishment charges, were recovered from the persons and firms concerned.

Insect Pests

Treatment during the year included disinfestation measures in respect of ants, silver fish, wasps, furniture beetle, cockroaches, flies, bugs and fleas, a comprehensive list, and one which indicates the need for adequate disinfestation facilities.

Infestation by woodworm beetles is a serious problem and appears to be causing concern to various authorities in different parts of the country. With this type of infestation, there is danger of serious material damage to the wooden parts of the structure of the house and the necessity for its prevention needs no emphasis. The subject has for some time received the particular attention of the Forest Products Research Laboratory, but there does not appear to be any easy solution. So far as furniture is concerned, treatment by hydrogen cyanide fumigation is considered to be the most effective, and in 5 instances, furniture from different houses in the Borough were dealt with in this way. In all there were 12 instances where the timber of houses was infested with these insects; 6 of the houses were Council houses. This underlines the importance of proper investigation into the condition of the houses and furniture, when removals from old houses to new Council houses are proposed.

It is generally admitted, that, where infestations affect timber in the house, there is no treatment which shows 100 per cent. efficiency. The method advised by the Department is the removal of as much infested material as possible, followed by a thorough treatment by a suitable insecticide of the remaining timber work and the new timber which is installed. Although the effectiveness of the treatment will not be apparent for some time, preliminary tests which have been made in the Department, indicate that the extent to which infestation is prevented by this treatment is considerable.

Income

Income derived from business firms and private individuals for the year in respect of rodent control and general disinfestation work amounted to £374 6s. 1d.

PART 7.—GENERAL

Factories, Shops and Offices

There are now 889 factories on the departmental factories register compared with 888 last year.

Complaints of infringements of the Factories Act, 1937, or the Sanitary Accommodation Regulations, 1938 were received from H.M. Inspector of Factories in respect of 141 premises. These reports were all investigated and appropriate remedial action taken.

Details of the types of factories inspected and of the action taken are set out in Table VI, on pages 97 and 98.

Action with respect to factories and offices was mainly restricted to complaints and the extension of investigations made in connection with other matters such as smoke abatement, town planning investigation, alterations to food factories, etc. Many shops were dealt with in the course of the food premises survey, and a matter marked for special attention, is the inspection of all factory canteens.

Cinemas

The 9 cinemas in the Borough have been inspected from time to time during the year and particular attention was given to the question of ventilation, cleanliness and the condition of the sanitary accommodation. Generally speaking, cinemas are maintained in a satisfactory state and all the matters to which the Department has called attention have been satisfactorily dealt with. A start was made with the installation of a new ventilating system in one cinema.

Fertilisers and Feeding Stuffs Act, 1926

Mr. F. E. Thompson, A.R.C.S., F.R.C.I., continued to hold the appointment of Analyst under the above Act, and during the year, 14 samples of fertilisers were submitted to him for examination and were found to be satisfactory. The samples included: Sulphate of Ammonia, 2; Nitrate of Soda, 2; Bone Meal, 2; Dried Blood, 1; Super Phosphate, 1; Special Top Dressing, 1; Sulphate of Potash, 1; Super Phosphate of Lime, 1; Sulphate of Ammonia, 1; and Proprietary Fertilisers, 2.

Public Baths

Considerable attention was given to the purity of the water supply in the Public Swimming Baths at Tower Street, Bloxwich, and in the Arboretum. In all, 53 samples were taken for the purposes of bacteriological and chemical analysis and in only one instance was an unsatisfactory report received. I was informed by the Baths Superintendent that the unsatisfactory conditions were due to a temporary breakdown in the purification plant. This matter was immediately remedied and subsequent samples proved satisfactory.

TABLE VI.

FACTORIES ACT, 1937 AND 1938

Prescribed particulars on the administration of the Factories Act, 1937.

1.—**INSPECTIONS** for purposes of provisions as to health (including inspections made by Sanitary Inspectors)

Premises (1)	M/c line No. (2)	Number on Register (3)	Number of			M/c line No. (7)
			Inspections (4)	Written notices (5)	Occupiers prosecuted (6)	
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities ...	1	75	14	7	Nil	1
(ii) Factories not included in (i) to which Section 7 is enforced by the Local Authority	2	812	161	30	Nil	2
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out- workers' premises)	3	2	—	—	Nil	3
TOTAL		889	175	37	Nil	

TABLE VI (continued)

2.—CASES IN WHICH DEFECTS WERE FOUND

Particulars (1)	M/c line No. (2)	Number of cases in which defects were found			Number of cases in which prosecutions were instituted (7)	M/c line No. (8)
		Found (3)	Remedied (4)	Referred To H.M. Inspector (5) By H.M. Inspector (6)		
Want of cleanliness (S.1) ...	4	45	23	—	27	4
Overcrowding (S.2) ...	5	—	—	—	—	5
Unreasonable temperature (S.3) ...	6	—	—	—	—	6
Inadequate ventilation (S.4) ...	7	8	4	5	3	7
Ineffective drainage of floors (S.6) ...	8	—	—	—	—	8
Sanitary Conveniences (S.7)	9	13	8	—	7	9
(a) insufficient ...	10	43	22	—	29	10
(b) Unsuitable or defective ...	11	2	2	—	2	11
(c) Not separate for sexes ...	12	98	60	—	73	12
Other offences against the Act (not including offences relating to Outwork) ...	60	209	119	5	141	60
TOTAL ...						

OUTWORKERS

In accordance with Section 110, reports were received of a total number of 89 Outworkers, all engaged in making wearing apparel. It was not necessary to take any action with respect to Outworkers.

PART 8.—LEGAL PROCEEDINGS

It was found necessary to institute legal proceedings in accordance with the provisions of the Public Health Act, 1936, on one occasion, and in respect of contraventions of the Food and Drugs Act, 1938, on two occasions, viz.:—

Act under which proceedings were taken	Nature of Offence	Remarks
Public Health Act, 1936, Section 94	Non-abatement of nuisances. Premises in such a state as to be a nuisance. Nos. 1, 3, 5, Upper Short Street.	The Magistrates made Orders for the abatement of the nuisances.
Food and Drugs Act, 1938, Section 13	Contravention of Section 13 (1) para (c) Do. „ (d) Do. „ (h) Do. „ (i) Do. (2) „ (b)	The two defendants were each fined £8. Corporation awarded 16s. costs.
Ditto	Contravention of Section 13 (1) para (d) Do. „ (g) Do. „ (h) Do. (2) „ (b)	The two defendants were each fined £3 on charges 1, 2 and 3, and £5 each on charge 4.

CONCLUSION

A feature of the year's work has been an indication of a return to more normal conditions, which has been helped by few staff changes. The value of the two additional Inspectors authorised by the Health Committee has been amply shown, particularly in connection with work relating to food administration. I must again pay tribute to the continued support of the Chairman and Members of the Health Committee, and I should be failing in my duty if I did not make some reference to the loss the department had in the death of the Chairman, Alderman A. J. Stanley, who had been particularly helpful and encouraging to me since my appointment as Chief Sanitary Inspector in 1935. It was pleasant to have Dr. Clark as Medical Officer of Health for a further year, and I have to thank him for continued help and co-operation. To the staff in the department who have again given unstinting service I tender my sincere thanks, and I wish specially to mention the help and assistance I have received from Mr. J. Green, my deputy, and the Specialist Inspectors, Messrs. Woodward, Bayley, Kelley and Hill, in the preparation of this report.

Yours obediently,

C. A. STANSBURY,

Chief Sanitary Inspector.

REPORT

OF THE

SCHOOL MEDICAL OFFICER

For the Year ended 31st December, 1949

MR. CHAIRMAN, LADIES AND GENTLEMEN,

I have the honour to submit my report on the School Health Service for the year ended 31st December, 1949.

1.—STAFF

There has been no change in the medical staff during the year. The dental staff has been further depleted, however, by the resignation of Mr. N. L. Cookson, who had been Senior Dental Surgeon since 1940, and who entered private practice during the year.

At the moment of writing, the dental staff has been still further depleted, and in a short time there will be only one Dental Surgeon on the staff.

Owing to the increasing demands on the medical staff, particularly in the examination of handicapped children, it has not been possible to complete the school programme. No re-inspections in the schools have been undertaken, nor has it been possible to undertake any medical inspection of pupils attending Queen Mary's Grammar Schools.

On the other hand, a larger number of educationally subnormal children has been examined, but there still remains a very large number of retarded children awaiting examination, who have been referred by head teachers for further investigation.

2.—SCHOOL HEALTH WORK—OBSERVATIONS

The following notes on various aspects of the School Health Service have been provided at my request by Dr. P. J. FitzGerald. Dr. FitzGerald is in charge of the minor ailments clinics and carries out the bulk of the Medical Inspections in the schools.

Personal Cleanliness. The standard of personal cleanliness is still far from satisfactory, little change being observed generally since last year though scabies appears to be declining in incidence.

Frequent cleanliness inspections were carried out in the schools, cases of pediculosis capitis infestation being found far too often especially among senior girls. Many cases received a home visit but unfortunately recurrences were common.

Pediculosis, like scabies, is a family condition and to prevent recurrences all members of the family should be encouraged to carry out treatment, otherwise re-infestation is apt to occur.

Much can be done and is being done by teachers in impressing the principles of hygiene on their pupils, but the primary responsibility for the personal cleanliness of school children rests with the parents.

School Clinics. The school clinics were well attended during the year, many cases being referred as a result of medical inspections in the schools. A considerable number of children were brought for treatment and advice, especially during the winter months, probably due to the heavy demand at this time of the year on the general practitioner service, with the result that many major and often acute conditions were seen as well as the usual minor ailments. Among the acute conditions encountered were the following: rheumatic fever, empyema, leukæmia, broncho-pneumonia, acute appendicitis, erysipelas, and a case of hæmoptysis which on further investigation at the chest clinic proved to be due to an adult form of pulmonary tuberculosis.

Findings at Medical Inspections. The following defects were frequently found at medical inspections—eye defects, nose and throat conditions, chronic bronchitis and foot defects.

Eye Defects. Among the eye defects, blepharitis is frequently encountered. This condition is almost always associated with some degree of malnutrition or general debility and, therefore, should be easily preventable if proper attention is paid to diet and general hygiene.

Cases referred to the school clinics responded to simple local treatment combined with nutrient tonics.

Nose and Throat conditions. The majority of children with defects of the nose and throat required specialist treatment and were referred to the Manor or General Hospitals.

Chronic Bronchitis. This condition is often encountered more especially among younger school children, the trouble often dating from an attack of measles or whooping cough. Judging from the

medical records of school inspections the majority of children who suffer from this complaint tend to recover spontaneously without permanent pulmonary damage, but unfortunately some on further investigation proved to be cases of bronchiectasis.

Foot Defects. In this group the following were common: Flat foot, hallux valgus and deformed toes.

A considerable amount of foot deformity of later life could be prevented if more attention was paid to children's footwear and it might be mentioned that the great majority of foot troubles of these later years are primarily due to abnormalities of the great toe such as hallux valgus, a condition far too common among older children. This condition, though primarily congenital, often becomes established as a definite deformity, and the cause of considerable discomfort as a result of the persistent use of faulty footwear.

Children are often brought along to medical inspections by parents, even though they are absent from school at the time with a sore throat, cough or "cold" and very often ordered to stay at home on their doctor's instructions. This should be discouraged as far as possible; it serves no useful purpose and can only be a further factor in the spread of respiratory infection.

Speech Therapy. During the year facilities for speech therapy were included in the school health service and many children with speech defects were referred by teachers. Many were found to require specialist treatment for ear, nose and throat conditions, and a considerable number required dental treatment as well. Prompt attention to these conditions should prove a useful adjunct to speech therapy, otherwise full benefit from such therapy may not be achieved without delay.

Many children with psychological disturbances were seen during the year and extension of the school health service to include Child Guidance facilities would benefit many of these cases.

3.—SCHOOL ACCOMMODATION

Queen Mary's High School and Grammar School	895	pupils
Art School	71	„
Technical College	112	„

(a) Secondary Schools

County Schools	12
Voluntary Schools	2

with accommodation for 5,899 pupils.

- (b) Primary Schools
 County Schools 28
 Voluntary Schools 15
 with accommodation for 13,531 pupils.
- (c) Nursery Schools 3
 with accommodation for 120 pupils.
- (d) Open Air School for 60 pupils.
- (e) Beacon Residential School for Educa-
 tionally Subnormal Pupils 77

The number of pupils on the register at 31st December, 1949 was 18,677, as follows—Primary and Secondary Schools 17,609, Queen Mary's School 895, Art School 71, Technical College 112, Nursery Schools 120.

Of the 17,609 pupils in Primary and Secondary Schools, the average attendance was 15,740.

4.—PHYSICAL AND MENTAL WELFARE

7,531 pupils were medically examined in the course of routine inspections; of that number the general condition was described as good in 21·6%, fair in 74·8% and as poor in 3·6%.

The following table shews the average heights and weights of all pupils medically inspected during 1949:—

			Numbers		Height, ins.		Weight, lbs.			
			Boys	Girls	Boys	Girls	Boys	Girls		
New Entrants	(5 +)		890	858	...	42 $\frac{1}{4}$	42 $\frac{1}{4}$	...	43 $\frac{1}{2}$	42
Juniors	...	(8 +)	794	750	...	51	50 $\frac{1}{4}$	...	61	59
Juniors	...	(10 +)	833	782	...	56 $\frac{1}{2}$	54 $\frac{1}{2}$	...	70 $\frac{1}{4}$	70 $\frac{1}{2}$
Seniors	...	(12 +)	681	705	...	58 $\frac{1}{4}$	56 $\frac{1}{4}$	...	84 $\frac{1}{2}$	87 $\frac{1}{2}$
Leavers	...	(14 +)	651	587	...	62 $\frac{3}{4}$	62 $\frac{1}{4}$	...	100	104 $\frac{3}{4}$

During the year 13 children of school age died, the cause of death being Rheumatic Endocarditis 3, Acute Leukæmia 2, Pneumonia 2, Accidental 2, Peritonitis 1, Tuberculous Meningitis 1, Myocarditis 1, Intussusception 1.

5.—SCHOOL CLINICS AND FOLLOW-UP

The treatment of minor ailments is carried out at the three School Clinics.

753 children were referred to the Ophthalmic Surgeon for errors of refraction or squint. Spectacles were prescribed in 620 cases and obtained in 617 cases. Fifteen children suffering from squint were

referred for orthoptic treatment. 347 children received operative treatment for adenoids and/or chronic tonsillitis, 44 for other nose and throat conditions, and 40 received other forms of treatment.

During the year 936 home visits were paid by the school nurses for the following purposes—(a) obtaining the consent of parents for eye treatment, (b) interviewing parents with regard to their children failing to keep appointments with the Orthopædic Specialist, or failing to keep appointments for treatment, (c) post-tonsillectomy visits to arrange for breathing exercises, (d) following up bad defects found at school medical inspections to ensure that treatment was obtained, (e) following up cases of long absence from school reported by the School Attendance Officers, (f) following up cases reported by Head Teachers where it was thought that no treatment was being obtained.

6.—UNCLEANLINESS

There has been a further decline in the number of Scabies treated—118 as against 239 in 1948.

It is deplorable to have to record that the standards of cleanliness in the majority of school departments have shown a decline over the past few years, and this applies not only to “dirty heads” but also to bodily cleanliness. Foot inspection in certain schools has revealed a shocking state of affairs. We have been fortunate in this part of the country in that there has been no water shortage, the soap ration, if not generous, is ample, and so we must assume that those parents who allow their children to go to school in as filthy a condition as many of the children seen at medical inspection, have themselves a very low standard of cleanliness in their homes, and that the child’s story of the “Saturday night bath” is also very largely fictitious. Shortage of coal cannot be altogether accepted as an excuse.

In many school departments the percentage of dirty heads shows an increase over the past two years. 114,722 examinations of pupils in the schools were made by the school nurses, fewer than in the previous year, but the number of individual children found unclean, viz., 1,180 is considerably higher. The Senior and Modern Girls’ Schools are again the worst offenders, followed closely by some of the junior and infant schools.

7.—PHYSICAL EDUCATION

I am indebted to Mr. A. J. Spears and Miss I. Munden, Physical Training Organisers, for the following interesting reports on Physical Education in the schools.

The trend towards a more informal and individual approach to training in movement is rapidly gaining a foothold in schools throughout the country, as teachers have seen for themselves the benefits to the children in control—self-confidence and all-round skill. We feel,

therefore, that, while we urged the gradual change over to the modern technique in Walsall schools, it has gained impetus on its merits, and that our departments as a whole are not lagging behind in the field of experiment to evolve more appropriate training suitable to individual needs.

Work in the girls' secondary departments continues to be hampered by the shortage of suitably qualified teachers; many departments are unfortunately badly under-staffed for physical education.

Senior boys have shown marked improvement in apparatus work and the more advanced forms of vaulting and agility, and are being coached very effectively.

Apparatus for gymnastics and games has been supplied in sufficient quantities to enable us to report that we are recovering from the checks imposed by the lean war years. The problem now to be faced is that of storage for equipment. The climbing apparatus mentioned in last year's report has been installed in five separate departments and is proving popular with the children and very revealing to the teachers so far as the children's character and inhibitions are concerned. We still hope to extend the provision of heaving and climbing apparatus as this type of work has a strong corrective effect in posture training.

Plimsolls have been allocated on a much larger scale during the year and this has been made possible by a generous donation from the School Children's Care Committee. We have always stressed the importance of plimsolls for physical activity and wish to record our thanks as well as those of the teachers in all departments to the School Children's Care Committee.

We are pleased to record that a number of departments gave very attractive displays during the National Savings Week, in the Walsall Town Hall. Children and teachers were largely volunteers, as the schools were on holiday, but the displays were none the less worthy examples of the standard of work to be seen in the schools.

Organised Games continue to make good progress. Boys' football is being handled with much enthusiasm and skill. A coaching course was held during May and June under the auspices of the Football Association and 25 teachers attended. A more liberal issue of cricket equipment has helped the schools with their coaching schemes, and we look forward confidently to the prospect of the better wickets which have been promised by the Parks Superintendent, whose co-operation with us in providing better conditions for games has been very much appreciated.

There was a much bigger entry from the girls' departments for the second inter-schools Hockey Tournament, and the standard of play showed a marked improvement on last year. The same can be said of the Junior Girls' Netball Tournament. The 225 Senior and 180 Junior entries for the Rounders Tournament held in the summer constituted a record.

Tennis has been introduced on a large scale for the first time to the older girls—14 departments having made use of the facilities provided in the Public Parks under special arrangements.

The High Jump League for older girls has continued under the general direction of the officials of the Walsall Athletic Club, and the results of the training were manifest in the National Junior Championships when the Hurdles event was won by a Walsall girl.

Boys' Athletic standards reveal a marked improvement in skill, and once again some well organised sports meetings were attended. We hope to be able to provide a suitable track properly marked in the near future, and this should greatly assist teachers responsible for the general organisation.

Further developments in schoolboy boxing have taken place during the year and are most encouraging. A local association affiliated to the A.B.A. has been formed and nine secondary departments are actively engaged with boxing instruction.

Swimming instruction has been maintained at the usual high level, and an encouraging feature is the organisation of individual school galas by an increasing number of departments. The awards for the season are given below. Improved staffing conditions in several schools are indicative of a revival of interest in Life Saving, and this will, we hope, afford better returns in 1950. A reduction in the total Life Saving awards cannot be viewed with complacency, but we do derive satisfaction from the fact that the standard of work with the candidates presented is definitely improving.

The officials of the Schools' Swimming and Life Saving Association are to be congratulated on the efficient and enthusiastic way in which they conduct the affairs of schoolboy swimming, and on the results of their work with the Annual Galas and competitive swimming in general.

					1948		1949					
					Boys	Girls	Boys	Girls				
1st Class Certificate	...	52	...	25	...	51	...	16				
2nd Class Certificate	...	172	...	132	...	223	...	86				
3rd Class Certificate	...	220	...	69	...	222	...	99				
Proficiency	...	186	...	110	...	175	...	77				
Junior Learners	...	239	...	141	...	179	...	163				
					—	—	—	—				
					869	...	477	...	850	...	441	
					—	—	—	—				
Total Boys and Girls 1948					...	1,346						
Total Boys and Girls 1949					...	1,291						
Royal Life-Saving Society Certificates (1949)							Boys	Girls				
Instructors	2	...	—				
Bronze Medallion	13	...	11				
Intermediate Certificate	10	...	5				
Elementary Certificate	34	...	41				
							—	—				
							59	57 = 116				
							—	—				
1948							...	46	73 = 119			
							—	—				

8.—PROVISION OF MEALS AND MILK FOR SCHOOL CHILDREN

I am indebted to Mrs. D. M. Curtis, School Meals Organiser, for the following report on the School Meals Service:—

“During the past twelve months there has been a slight decline in the number of meals served, due partly to the discontinuance of Saturday and holiday meals, the demand for which did not warrant the high overhead costs, and partly to lower parental incomes and the easing of food supplies.

The total number of meals served during 1949 was 1,213,834 (1,008,158 for payment and 205,676 free) as against 1,300,398 (1,079,292 paid and 221,106 free). The price of the meal remained at 5d. for children—the cost of food only being charged—though an increase of 1d. has had to be made from 1st January, 1950.

The “Milk in Schools” Scheme continues in operation, and on 12th October, 1949, the number of one-third pints supplied was 15,296, which represents 88·8% of the children attending school on that day.”

9.—INFECTIOUS DISEASE

Diphtheria. There were 2 cases of Diphtheria in school children during the year as against 2 in the previous year. There were no deaths. One of the two children had been immunised.

During the year 1,067 children under the age of 5 years and 1,162 between the ages of 5 and 15, a total of 2,229 were immunised against diphtheria. 2,111 children received a re-inforcing dose.

Scarlet Fever. 103 cases of Scarlet Fever occurred amongst school children as against 271 in 1948. There were no deaths.

Measles. There were 856 cases of Measles as against 245 in 1948; almost all of these occurred during the first quarter of the year. There were no deaths.

Whooping Cough. 117 cases of Whooping Cough were notified amongst school children as against 105 in the previous year. The cases were evenly distributed throughout the year. There were no deaths.

Cerebro-Spinal Meningitis. One case was notified.

Poliomyelitis. No cases were notified.

Para-typhoid. One case was notified.

In addition 33 cases of Pneumonia and one case of Erysipelas were notified amongst school children. Two children died from Pneumonia.

10.—HANDICAPPED CHILDREN

Deaf. There were 18 children in residential schools for the deaf or partially deaf, two girls being admitted during the year. Three children were in attendance at Special Day Schools.

Blind. No children were placed during the year. One totally blind boy and 6 partially sighted children were in residence in special schools at the end of the year. Two boys were discharged to the ordinary schools during the year.

Educationally Subnormal. Ten boys were admitted to Beacon Residential School, Lichfield, during the year; one boy was discharged on attaining school leaving age. There were 30 Walsall boys in residence at the end of the year. One girl was discharged from a special school and admitted to a non-special school, and the parents of one girl in a special school left the area, the girl ceasing to be the responsibility of this local education authority.

Fifty-seven children examined during the year were found to be educationally subnormal, and in need of educational training in special schools.

There were 117 ascertained educationally subnormal children awaiting admission to a special school at the end of the year. The provision of a day special school for this type of child becomes more and more urgent.

The following children were notified to the local health authority:—

Under Section 57 (3)	Idiots	4
	Imbeciles	4
Under Section 57 (5)	Educationally Subnormal ...	2
	Total ...	<hr/> 10 <hr/>

These handicapped children were in the following Special Schools:—

	Boys	Girls	Total
Royal School for the Deaf (Birmingham)	2	3	5
Moseley Road School for the Deaf (Birmingham)	3	—	3
The Mount School for the Deaf (Stoke)	2	9	11
Royal Institution for the Blind ...	4	3	7

Educationally Subnormal—

Beacon School, Lichfield	30	—	30
---------------------------------	----	---	----

In addition other handicapped children were in special schools, as follows:—

Condover Hall, Shrewsbury—

(Blind and Educationally subnormal) 1 boy

National Children's Home, Chipping Norton—

(Physically Defective & Educationally subnormal) 1 boy

Brambley House Clinic, Chesterfield—

(Maladjusted) 1 boy

Carlson House, Harbourne—

(Spastics) 1 girl

Colthurst House School, Warford—

(Epileptics) 1 girl

Home Tuition. Education was provided in their own homes for 6 children whose physical condition was such that they were unable to attend any primary or secondary school.

Crippled Children. 437 children received treatment at the Orthopædic Clinic, Bradford Street, and 17 children received in-patient treatment at the Royal Cripples Hospitals, The Woodlands and the Forelands.

Hospital Treatment. 1,419 school children were admitted to hospitals in Walsall for in-patient treatment.

Speech Therapy. We were fortunate in obtaining the part-time services of a qualified Speech Therapist, Mrs. R. M. Senior, who came to us at the beginning of November.

Although Mrs. Senior is able to give us only two days per week, we are extremely grateful, and although she has only been working for us for a comparatively short period, we already recognise the value of her work and the great need for its extension.

During the two months, Mrs. Senior interviewed 139 children and selected the most urgent cases for treatment. 62 children have been under treatment as follows: Stammerers 32, Dyslalics 25, Cleft Palate 5. These children made 245 attendances.

The parents generally accompany their children, and take a great interest in the instruction. 313 visits were made by parents to the clinic. At the end of the year 77 children were on the waiting list for treatment.

11.—BEACON RESIDENTIAL SCHOOL

To Mr. G. F. Taylor, Superintendent of the Beacon Residential School for Educationally Sub-normal children, I am indebted for the following interesting report on the work at Beacon School.

“I am happy to report that the work of the School during 1949 has gone forward smoothly. We have admitted seventeen new pupils, whose ages have ranged from 5 to 14 and who have taken the places of a corresponding number of senior boys. It is gratifying to receive an increasing number of Walsall boys—we now have 30, nearly half of the School, while the remainder are drawn from 24 different Education Authorities up and down the country. The age distribution at the end of the year is:—

Under seven years	...	...	...	1
Over seven and under 11	...	...	...	16
Over 11 years	...	...	...	60

While the distribution of I.Q.'s is:—

Under 50%	...	...	...	...	1
Over 50 and under 61	...	...	...	...	21
Over 60 and under 71	...	...	...	...	32
Over 70 and under 81	...	...	...	...	17
Over 80 and under 91	...	...	...	...	6

Of the seventeen new admissions, three only had already begun to read to the extent of recognising certain 2, 3 and 4 letter words—the remaining 14 knowing only a few letters and one or two words, or knowing no letters at all—and this is typical of the standard at which our pupils come to us. Of the boys who left the school at the age of 16 during the year, some few had been here for 7 to 8 years, coming to us as youngsters of 7 or 8, and they are now reading fluently at the 12—13 or 14th year level. This is the more creditable in such cases when it is understood that the educationally subnormal child has comparatively little opportunity for poring over books—his lessons being largely concerned with what is concrete and practical. It further endorses the contention that every endeavour should be made to dispose of the educationally subnormal child by placing him in a Special School at an early age—such a course is to everyone's advantage, but to the pupils especially. To be able to read sufficiently well for his own amusement and guidance reduces his handicap and in many cases almost eliminates it. On the other hand, the child who, at the age of 12 or 13 has not commenced the rudiments of reading, is often confirmed in the notion that he will never read, and unless his temperament is such that he can respond to a little persuasion, work with him had better be abandoned so far as reading is concerned—but the Special School teacher is loath to arrive at such a conclusion. How comparatively fortunate is the educationally subnormal child who is transferred to the Special School at the age of 7 or 8! Similarly, our new admissions as a rule have very little number knowledge or arithmetical ability. The boy who knows any tables at all, or who can deal in numbers larger than 10, or who has any knowledge of money is very exceptional among our new entrants. The number sense is usually more difficult to develop than the reading skill and much of the non-success in teaching arithmetic to such pupils is due to the impatience of both teacher and taught—both tending to proceed to a new stage before the work in hand is properly assimilated—both attaching undue importance to written arithmetic and regarding the correct setting down of sums as the end to be achieved, rather than a means to an end.

In their practical work outside the classrooms many of the boys have done some excellent shoe-repairing—keeping the whole school properly shod—some good gardening, assisting in the growing of a variety of vegetables in our 3 acre garden, as well as tending plots of their own very successfully. Some have executed commendable models in their woodwork lessons and in their cardboard lessons, learning to measure accurately to sixteenths and thirty-seconds of an inch, and making desirable objects for use either in the School or home. This practical work has a considerable compensatory value and is often used as an avenue of approach for successful reading and arithmetic.

The physical education and training of the boys has gone apace and abundant opportunity has been afforded for organized outdoor games. Every weekday afternoon a full hour is devoted to such

activities. The School Football and Cricket Teams have played numerous matches with local teams of youths in the appropriate seasons—our gymnastic and our club swinging teams have given public displays which have received warm commendation. Our little swimming bath has been in constant use and we have twenty-one proficient swimmers as well as many starters. Similarly, the leisure time of the boys has been carefully organised for indoor activities. Our senior boys meet the local Youth Club each week at Table Tennis. We have a very enthusiastic Chess Club—no less than 29 boys now display a knowledge of the rudiments of the game, and some of our senior boys play with keen deliberation and due care. We have attempted to make our own draught and chess boards and the necessary pieces with which to play these games.

The general health of the boys has been exceptionally good. During the year we have enjoyed immunity from infection. Maybe the very prolonged spell of summer weather and the mild conditions so far experienced during the Autumn and Winter months have helped considerably. During a period of twenty-eight years' work with educationally subnormal children we have observed that cold and windy weather rather than wet weather causes such children to become ailing and sickly.

The School Sports and Prize Day on the 30th June was a great occasion. We were honoured with the presence of the Mayor and Mayoress of Lichfield and the Deputy Mayor and Mayoress of Walsall, as well as other distinguished visitors and parents. The usual programme of events was worked through. Every boy was afforded opportunity somehow and somewhere, and every boy actually won something. No child was a complete failure or loser. Later the Annual Prize Distribution occurred—the prizes being graciously presented by the Mayoress of Lichfield, Mrs. A. W. Handford.

On 9th December the boys had their Annual Christmas Tea and Party, and again we were honoured with the presence of a number of visitors from both Walsall and Lichfield. During the afternoon the boys gave an entertainment, every class contributing one or more items to the programme, which included Club Swinging, Dances, Sketches and Songs. The Mayor of Walsall, Councillor T. Riley, and our Chairman, Councillor F. Evans, both addressed the boys and after tea was over the room was cleared and the evening devoted to the enjoyment of a programme of party games and amusements, including a visit from Santa Claus and a distribution of gifts from the Christmas Tree. These gifts were made possible through the generosity of one or two friends and particularly the Walsall Licensing Committee.

The usual holidays have been enjoyed by the boys—all went away in the Summer and at Christmas, and some also went home for the Easter holiday.

During the year we have had visits from many of our former pupils. Three of them came to spend the Easter holidays, travelling from as far as South Wales or Sheffield and staying three or four days. We have also had interesting letters, some from those in the Services overseas. It is gratifying to realise that so many of our pupils maintain their affection for and their interest in the school of their childhood."

12.—DENTAL TREATMENT

The following report on the School Dental Service has been received from Mr. R. E. Morgan, L.D.S., Senior Dental Surgeon.

"During the past year it was not possible to carry out a comprehensive dental programme, due to the difficulty in obtaining adequate dental personnel. At present, the services of two dental surgeons are available, these being responsible for a school population of 18,000 children. It had been hoped that during the first full year under the National Health Service, a full dental scheme would have been possible, covering treatment to expectant and nursing mothers and pre-school children, this being carried out within the framework of the School Dental Service.

In February, Mr. Humphrey, who had been acting in a part-time capacity, resigned. We were fortunate in obtaining the services of Mrs. I. M. Miller, L.D.S., who joined the staff on 31st January. The Senior Dental Officer, Mr. N. L. Cookson, left the service in April, the appointment being filled by Mr. R. E. Morgan. This meant a re-organisation of the dental service, it being necessary for the discontinuation of conservative treatment at the Field Road clinic at Bloxwich. I would like to pay tribute to the work of Mr. Cookson who left us to enter private practice.

During the year the number of patients accepting treatment remained fairly constant, a percentage of 88% receiving treatment. The number of patients inspected was less than the previous year, 6,758 compared with 8,000. There is little virtue in high inspection figures unless opportunity can also be offered for treatment. With regard to the selection of patients for inspection, priority was given to those children entering school for the first time. By this means, facilities were provided for patients to commence their school lives with healthy mouths. It was noted that in the infants' schools a high immunity to dental caries was present, a large proportion of these children requiring little or no treatment. This low incidence of dental caries may well be due to the facilities offered at the welfare centres and in the schools, where the issue of milk, cod liver oil and orange juice is manifesting itself in respect of sound dentitions.

The number of extractions and fillings during the year was 7,508 and 2,110 respectively. Of the permanent dentition, 912 teeth were found to be unsaveable and extracted, and 2,034 fillings were inserted. General anæsthetics were administered on 2,845 occasions and 370 local injections given. The proportion of fillings inserted in the permanent teeth to the number of permanent teeth extracted was a little over 2 to 1. This ratio is a little lower than last year and would undoubtedly have been higher had it been possible to provide conservative treatment before extensive caries developed. In connection with conservative treatment, it was found that the best policy was the provision of complete treatment only to those patients who would derive the most benefit. Extensive conservative work to patients taking little interest in their teeth and neglecting mouth hygiene is wasteful utilisation of the dental services. Every effort has been made to impress on both parents and patients that, although the dental scheme can be of great help and benefit to them, a great deal can be done by the practice of dental hygiene in the home.

During the year the number of emergency cases rose to 1,115 against the previous 739. I would suggest that in view of the present inadequacy of dental staff, a part-time anæsthetist be appointed. This would help considerably in the reduction of casual cases and release the services of a dental officer for conservative work, which is a very important aspect of the service.

In the section "other operations" numbering 276, numerous conditions affecting the oral cavity received attention. Chief of these was gingivitis and its frequent development into Vincents Angina if left untreated. Methods of treatment included vitamin C therapy, localised medication, specific mouth-washes and cauterisation in cases of gross gingival hypertrophy. Treatment of dental irregularities by simple appliances has proved very successful. Overcrowding of the teeth appears to be on the increase, this being most apparent in artificially fed children and those patients giving little masticatory attention to their food. The use of X-rays for diagnostic purposes has proved invaluable and every use is made of the facilities provided by the Manor Hospital. In all, the number of X-rays taken was 92. I am indebted to the department for these services, likewise to the co-operation shown by the Birmingham Dental Hospital in the treatment of orthodontic cases requiring specialised attention.

This year, in spite of all the efforts made by the dental staff, it is apparent that much remains to be done. Apart from the high immunity to caries noted among the early age-groups, the dental conditions of the children as a whole has deteriorated. The hope and ambition for the future is not only the maintenance of the dental service, but also its extension. This accomplishment can only be achieved by increase of staff and accommodation. My thanks are due to the dental staff for their untiring efforts during the past year."

13.—HEALTH EDUCATION

The Health Department, through the Superintendent Health Visitor, arranged for courses of instruction in Mothercraft to be given to senior girls in 12 secondary modern schools. The lectures, at present, are given only to girls of 14 years and upwards, but when possible we should like to commence health education from the age of 11 years. A total of 85 lectures was given by various members of the Health Visiting Staff, and at the end of the series an examination was held and we are pleased to report that 182 certificates of proficiency in Mothercraft were awarded.

This form of instruction is very popular indeed, and it is not too much to say that all the pupils and Health Visitors enjoyed their Mothercraft lessons to the full. Although the number of courses of instruction given during 1949 is the largest we have yet been able to arrange, we feel quite strongly that there should be a very considerable extension of this type of work as many senior girls are leaving school without any instruction in mothercraft. It should be understood that the courses of lectures given not only include mothercraft instruction, but also the all important subject of personal hygiene, and we realise that this subject is one in which instruction is sorely needed in some schools in the town.

An interesting part of the mothercraft instruction is the visit which each girl pays to a Welfare Centre, where practical instruction is given to the girls. Undoubtedly thereby a more ready appreciation is obtained of the work which is carried out at the Welfare Centres. The visit teaches the girls the medical and nursing facilities which are available to all mothers, and demonstrates the facilities provided by the State and Municipality. These visits are very much appreciated by the girls, and we feel sure the knowledge given will bear fruit in the years to come.

Other officers of the Department have given talks to various organisations during the year and the Department is always willing to extend this type of health education upon request.

A number of Student Teachers, home on leave from training colleges, have been given an opportunity to visit our Maternity and Child Welfare and School Clinics and a programme covering the various aspects of the work is mapped out for each individual student. We are always willing to welcome Student Teachers for we feel that knowledge of the services provided will be invaluable to them during their teaching career.

14.—TALKS TO PARENTS

The Superintendent Health Visitor has continued to give lectures to parents of school children upon matters relating to the welfare of the children, and these talks were very well received. During the year talks were given to parents at the following schools, etc., on the subjects named:—

Birchills School	-	-	Maintenance of good health in the school child.
Chuckery Infants' School	-	Children's Infectious Ailments.	
Chuckery Junior School	-	School Medical Service.	
Women's Institute, Caldmore	-	Home Helps.	
Women's Meeting, Mellish Rd.	-	Home Safety.	
Chuckery Junior School	-	Home Safety.	
Croft Street Infants' School	-	Maintenance of good health in the school child.	

Whilst we are reasonably satisfied with the number of talks we have been able to give, it is a matter for regret that this type of education has not been extended, mainly owing to the lack of requests from the schools. It is realised that it is often difficult for Head Teachers to arrange for Parent-Teacher Associations to take an interest in all the various aspects of school activities, but our aim is that all Parent-Teacher Associations should have at least one lecture on health education during each winter session. It is good for parents and those interested in the medical welfare of their children to meet on common ground and much misapprehension can be disposed of at these very personal meetings. We extend again to all head teachers a cordial invitation to collaborate in our work of passing on to parents the specialised knowledge of our medical and nursing staffs.

15.—CONCLUSION

The School Health Service has suffered from shortages of staff, particularly dental staff, and consequently the number of children actually treated is considerably less and the volume of conservative work has also declined. The continued shortage of health visitors has meant a falling off in the work of "following-up," and investigation into home conditions. There appears to be no immediate prospect of any improvement in the staff situation.

My sincere thanks are due to the Director of Education for his continued helpful co-operation in the work of the School Health Service and to the Head Teachers for their co-operation at all times. To Miss Dickenson, Secretary to the School Health Service, I would again pay tribute for the very able, efficient and sympathetic way in which she deals with the school child.

I am, Mr. Chairman, Ladies and Gentlemen,

Your Obedient Servant,

JAMES A. M. CLARK,

March 1950.

School Medical Officer.

MEDICAL INSPECTIONS AND TREATMENT RETURNS

Year ended 31st December, 1949.

TABLE 1

Medical Inspections of Pupils Attending Maintained Primary and Secondary Schools (including Special Schools)

A. PERIODIC MEDICAL INSPECTIONS.

(1) Number of Inspections:

Entrants	1,748	
Second Age Group ...	1,615	
Third Age Group	1,238	
	—	Total 4,601

(2) Number of other Periodic Inspections 2,930

GRAND TOTAL 7,531

B. OTHER INSPECTIONS

Number of Special Inspections	3,796
Number of Re-inspections	2,223
	TOTAL 6,019

C. PUPILS FOUND TO REQUIRE TREATMENT

Number of Individual Pupils found at Periodic Medical Inspection to require treatment (excluding Dental Diseases and Infestation with Vermin)

Group (1)	For defective vision (excluding squint) (2)	For any of the other conditions recorded in Table II _A (3)	Total individual pupils (4)
Entrants	1	412	413
Second Age Group ...	150	285	332
Third Age Group	125	213	259
Total (prescribed groups)	276	910	1,004
Other Periodic Inspections	253	638	648
Grand Total ...	529	1,548	1,652

TABLE 2

A. RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE
YEAR ENDED 31ST DECEMBER, 1949.

Defect or Disease (1)	PERIODIC INSPECTIONS		SPECIAL INSPECTIONS	
	No. of defects		No. of defects	
	Requiring treatment (2)	Requiring to be kept under observation but not requiring treatment (3)	Requiring treatment (4)	Requiring to be kept under observation but not requiring treatment (5)
Skin	58	31	306	5
Eyes—a. Vision ...	529	263	54	27
b. Squint ...	70	66	12	6
c. Other ...	80	27	134	1
Ears—a. Hearing ...	15	31	7	2
b. Otitis Media	111	62	76	3
c. Other ...	9	7	65	1
Nose or Throat ...	338	591	393	70
Speech	25	26	1	7
Cervical Glands ...	86	218	25	23
Heart and Circulation	64	153	79	11
Lungs	199	103	270	11
Developmental—				
a. Hernia ...	11	15	4	4
b. Other ...	12	33	3	1
Orthopaedic—				
a. Posture ...	135	86	15	10
b. Flat foot ...	243	43	32	15
c. Other ...	118	155	44	36
Nervous System				
a. Epilepsy ...	2	2	4	—
b. Other ...	18	49	87	4
Psychological—				
a. Development	2	18	7	4
b. Stability ...	2	5	16	—
Other	81	94	760	3

B. CLASSIFICATION OF THE GENERAL CONDITION OF PUPILS
INSPECTED DURING THE YEAR IN THE AGE GROUPS.

Age Groups	Number of pupils Inspected	A. (Good)		B. (Fair)		C. (Poor)	
		No.	% of col. 2	No.	% of col. 2	No.	% of col. 2
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
Entrants ...	1,748	517	29.6	1,187	67.9	44	2.5
Second Age Group ...	1,615	317	19.6	1,224	75.8	74	4.6
Third Age Group ...	1,238	239	19.3	973	78.6	26	2.1
Other Periodic Inspections	2,930	551	18.8	2,249	76.8	130	4.4
Total ...	7,531	1,624	21.6	5,633	74.8	274	3.6

TABLE 3

INFESTATION WITH VERMIN

- (i) Total number of examinations in the schools by the
school nurses or other authorized persons ... 114,722
- (ii) Total number of individual pupils found to be
infested ... 1,180
- (iii) Number of individual pupils in respect of whom
cleansing notices were issued ... —
- (iv) Number of individual pupils in respect of whom
cleansing orders were issued ... —

TABLE 4

TREATMENT TABLES

Group 1—MINOR AILMENTS (excluding Uncleanliness for which see Table 3).

(a)	Number of Defects treated or under treatment during the year
SKIN—	
Ringworm—Scalp	
(i) X-Ray treatment	—
(ii) Other treatment	1
Ringworm—body	22
Scabies	31
Impetigo	304
Other skin diseases	88
Eye Disease (External and other, but excluding errors of refraction, squint and cases admitted to hospital)	242
Ear Defects	267
Miscellaneous (e.g. minor injuries, bruises, sores, chilblains etc.)	4,623
Total ...	5,578
(b) Total number of attendances at Authority's minor ailments clinics	10,898

Group 2—DEFECTIVE VISION AND SQUINT (excluding Eye Disease treated as Minor Ailments—Group 1)

	No. of defects dealt with
Errors of Refraction (including squint)	753
Other defect or disease of the eyes (excluding those recorded in Group 1	—
Total ...	753

No. of Pupils for whom spectacles were (a) Prescribed ... 620
(b) Obtained ... 617

Group 3.—TREATMENT OF DEFECTS OF NOSE AND THROAT

	Total No. treated
Received operative treatment—	
(a) for adenoids and chronic tonsillitis	347
(b) for other nose and throat conditions	44
Received other forms of treatment	40
	<hr/> 431 <hr/>

Group 4—ORTHOPÆDIC AND POSTURAL DEFECTS

(a) No. treated as in-patients in hospitals or hospital schools	17
(b) No. treated otherwise e.g. in clinics or out-patient departments	437

Group 5—CHILD GUIDANCE TREATMENT AND SPEECH THERAPY

No. of pupils treated

(a) under Child Guidance arrangements	—
(b) under Speech Therapy arrangements	69

TABLE 5**DENTAL INSPECTION AND TREATMENT**

(1) Number of pupils inspected by the Authority's Dental Officers—	
(a) Periodic age groups	5,643
(b) Specials	1,115
(c) TOTAL (periodic and specials)	<hr/> 6,758 <hr/>
(2) Number found to require treatment	5,786
(3) Number actually treated	4,264
(4) Attendances made by pupils for treatment	5,574

(5) Half-days devoted to:—

Inspection	...	...	...	...	...	...	14	
Treatment	...	...	...	...	...	...	829	
TOTAL	...	...	...	...	...	...	———	843

(6) Fillings:—

Permanent Teeth	...	...	...	...	...	...	2,034	
Temporary Teeth	...	...	...	...	...	...	76	
TOTAL	...	...	...	...	...	...	———	2,110

(7) Extractions:—

Permanent Teeth	...	...	...	...	...	...	912	
Temporary Teeth	...	...	...	...	...	...	6,596	
TOTAL	...	...	...	...	...	...	———	7,508

(8) Administration of general anæsthetics for
extraction

...	2,845
-----	-----	-----	-----	-----	-----	-------

(9) Other operations:—

Permanent Teeth	}	276
Temporary Teeth		

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